

| United States Bankruptcy Court<br>Northern District of Illinois   |  | Voluntary Petition   |
|---|--|--|
| Name of Debtor (if individual, enter Last, First, Middle):<br>Shafer, Vanessa Leigh   |  | Name of Joint Debtor (Spouse) (Last, First, Middle):<br>Shafer, Christopher Michael  |
| All Other Names used by the Debtor in the last 8 years<br>(include married, maiden, and trade names):<br>fka Vanessa Brady  |  | All Other Names used by the Joint Debtor in the last 8 years<br>(include married, maiden, and trade names):<br>None  |
| Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN<br>(if more than one, state all): 1562  |  | Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN<br>(if more than one, state all): 5652   |
| Street Address of Debtor (No. and Street, City, and State)<br>408 Kresswood Drive<br>McHenry, IL<br>ZIPCODE 60050   |  | Street Address of Joint Debtor (No. and Street, City, and State)<br>408 Kresswood Drive<br>McHenry, IL<br>ZIPCODE 60050  |
| County of Residence or of the Principal Place of Business:<br>Mchenry   |  | County of Residence or of the Principal Place of Business:<br>Mchenry  |
| Mailing Address of Debtor (if different from street address):<br>ZIPCODE  |  | Mailing Address of Joint Debtor (if different from street address):<br>ZIPCODE   |
| Location of Principal Assets of Business Debtor (if different from street address above):<br>ZIPCODE  |  |  |
| <b>Type of Debtor</b><br>(Form of Organization)<br>(Check <b>one</b> box)<br><input checked="" type="checkbox"/> Individual (includes Joint Debtors)<br><i>See Exhibit D on page 2 of this form.</i><br><input type="checkbox"/> Corporation (includes LLC and LLP)<br><input type="checkbox"/> Partnership<br><input type="checkbox"/> Other (If debtor is not one of the above entities,<br>check this box and state type of entity below.)<br>_____  | <b>Nature of Business</b><br>(Check <b>one</b> box)<br><input type="checkbox"/> Health Care Business<br><input type="checkbox"/> Single Asset Real Estate as defined in<br>11 U.S.C. § 101 (51B)<br><input type="checkbox"/> Railroad<br><input type="checkbox"/> Stockbroker<br><input type="checkbox"/> Commodity Broker<br><input type="checkbox"/> Clearing Bank<br><input type="checkbox"/> Other<br>_____<br><b>Tax-Exempt Entity</b><br>(Check box, if applicable)<br><input type="checkbox"/> Debtor is a tax-exempt organization<br>under Title 26 of the United States<br>Code (the Internal Revenue Code) | <b>Chapter of Bankruptcy Code Under Which<br/>the Petition is Filed</b> (Check one box)<br><input type="checkbox"/> Chapter 7<br><input type="checkbox"/> Chapter 9<br><input type="checkbox"/> Chapter 11<br><input type="checkbox"/> Chapter 12<br><input checked="" type="checkbox"/> Chapter 13<br><input type="checkbox"/> Chapter 15 Petition for<br>Recognition of a Foreign<br>Main Proceeding<br><input type="checkbox"/> Chapter 15 Petition for<br>Recognition of a Foreign<br>Nonmain Proceeding<br><b>Nature of Debts</b><br>(Check one box)<br><input checked="" type="checkbox"/> Debts are primarily consumer<br>debts, defined in 11 U.S.C.<br>§ 101(8) as "incurred by an<br>individual primarily for a<br>personal, family, or household<br>purpose."<br><input type="checkbox"/> Debts are primarily<br>business debts |
| <b>Filing Fee</b> (Check one box)<br><input checked="" type="checkbox"/> Full Filing Fee attached<br><input type="checkbox"/> Filing Fee to be paid in installments (Applicable to individuals only) Must attach<br>signed application for the court's consideration certifying that the debtor is unable<br>to pay fee except in installments. Rule 1006(b). See Official Form No. 3A.<br><input type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must<br>attach signed application for the court's consideration. See Official Form 3B.  |  | <b>Check one box: Chapter 11 Debtors</b><br><input type="checkbox"/> Debtor is a small business as defined in 11 U.S.C. § 101(51D)<br><input type="checkbox"/> Debtor is not a small business as defined in 11 U.S.C. § 101(51D)<br><b>Check if:</b><br><input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts<br>owed to insiders or affiliates) are less than \$2,190,000<br><b>Check all applicable boxes</b><br><input type="checkbox"/> A plan is being filed with this petition.<br><input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or<br>more classes, in accordance with 11 U.S.C. § 1126(b).  |
| <b>Statistical/Administrative Information</b><br><input checked="" type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors.<br><input type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for<br>distribution to unsecured creditors.<br>Estimated Number of Creditors<br><input type="checkbox"/> 1-49 <input type="checkbox"/> 50-99 <input checked="" type="checkbox"/> 100-199 <input type="checkbox"/> 200-999 <input type="checkbox"/> 1000-5000 <input type="checkbox"/> 5,001-10,000 <input type="checkbox"/> 10,001-25,000 <input type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> Over 100,000<br>Estimated Assets<br><input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input checked="" type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion<br>Estimated Liabilities<br><input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input checked="" type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion |  | <b>THIS SPACE IS FOR<br/>COURT USE ONLY</b>  |

**Voluntary Petition**

(This page must be completed and filed in every case)

**Document Page 2 of 76**

Name of Debtor(s):

Vanessa Leigh Shafer &amp; Christopher Michael Shafer

**All Prior Bankruptcy Cases Filed Within Last 8 Years** (If more than two, attach additional sheet)Location  
Where Filed: NONE

Case Number:

Date Filed:

Location  
Where Filed: N.A.

Case Number:

Date Filed:

**Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor** (If more than one, attach additional sheet)

Name of Debtor: NONE

Case Number:

Date Filed:

District:

Relationship:

Judge:

**Exhibit A**

(To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11)

☐ Exhibit A is attached and made a part of this petition.**Exhibit B**

(To be completed if debtor is an individual whose debts are primarily consumer debts)

I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter.  
I further certify that I delivered to the debtor the notice required by 11 U.S.C. § 342(b).

**X** /s/ Scott A. Bentley 28 OCTOBER 2008  
Signature of Attorney for Debtor(s) Date

**Exhibit C**

Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?

☐ Yes, and Exhibit C is attached and made a part of this petition.☒ No**Exhibit D**

(To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)

☒ Exhibit D completed and signed by the debtor is attached and made a part of this petition.

If this is a joint petition:

☒ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.**Information Regarding the Debtor - Venue**

(Check any applicable box)

☒ Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.☐ There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.☐ Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.**Certification by a Debtor Who Resides as a Tenant of Residential Property**

(Check all applicable boxes)

☐ Landlord has a judgment for possession of debtor's residence. (If box checked, complete the following.)\_\_\_\_\_  
(Name of landlord that obtained judgment)\_\_\_\_\_  
(Address of landlord)☐ Debtor claims that under applicable non bankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and☐ Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.☐ Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(1)).

B1 (Official Form 1) (1/08)

Document

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Page 3

**Voluntary Petition***(This page must be completed and filed in every case)*

Name of Debtor(s):

Vanessa Leigh Shafer &amp; Christopher Michael Shafer

**Signatures****Signature(s) of Debtor(s) (Individual/Joint)**

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.

[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

**X** /s/ Vanessa Leigh Shafer

Signature of Debtor

**X** /s/ Christopher Michael Shafer

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

28 OCTOBER 2008

Date

**Signature of a Foreign Representative**

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only **one** box.)

I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by § 1515 of title 11 are attached.



Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

**X**

(Signature of Foreign Representative)

(Printed Name of Foreign Representative)

(Date)

**Signature of Attorney\*****X** /s/ Scott A. Bentley

Signature of Attorney for Debtor(s)

SCOTT A. BENTLEY 6191377

Printed Name of Attorney for Debtor(s)

Firm Name

661 Ridgeview Drive

Address

McHenry, IL 60050

(815) 385-0669

Telephone Number

28 OCTOBER 2008

Date

\*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

**Signature of Debtor (Corporation/Partnership)**

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

**X**

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

**Signature of Non-Attorney Petition Preparer**

I declare under penalty of perjury that: 1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110, 2) I prepared this document for compensation, and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. § 110(b), 110(h), and 342(b); and, 3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110 setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social Security Number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)

Address

**X**

Date

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

*A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.*

Official Form 1, Exhibit D (10/06)

**UNITED STATES BANKRUPTCY COURT**  
**Northern District of Illinois**

Vanessa Leigh Shafer & Christopher  
Michael Shafer

In re \_\_\_\_\_  
Debtor(s)

Case No. \_\_\_\_\_  
(if known)

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH  
CREDIT COUNSELING REQUIREMENT**

**Warning:** You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

*Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.*

☒ 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

☐ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.*

**Official Form 1, Exh. D (10/06) – Cont.**

☐ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Must be accompanied by a motion for determination by the court.]* *[Summarize exigent circumstances here.]* \_\_\_\_\_

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**If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed.**

☐ 4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.]* *[Must be accompanied by a motion for determination by the court.]*

☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

☐ Active military duty in a military combat zone.

☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

**I certify under penalty of perjury that the information provided above is true and correct.**

Signature of Debtor: /s/ Vanessa Leigh Shafer  
VANESSA LEIGH SHAFER

Date: 28 OCTOBER 2008

Official Form 1, Exhibit D (10/06)

**UNITED STATES BANKRUPTCY COURT**  
**Northern District of Illinois**

Vanessa Leigh Shafer & Christopher  
Michael Shafer

In re \_\_\_\_\_  
Debtor(s)

Case No. \_\_\_\_\_  
(if known)

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH  
CREDIT COUNSELING REQUIREMENT**

**Warning:** You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

*Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.*

☒ 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

☐ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.*

**Official Form 1, Exh. D (10/06) – Cont.**

☐ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Must be accompanied by a motion for determination by the court.]**[Summarize exigent circumstances here.]* \_\_\_\_\_

---

**If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed.**

☐ 4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.]* *[Must be accompanied by a motion for determination by the court.]*

☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

☐ Active military duty in a military combat zone.

☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

**I certify under penalty of perjury that the information provided above is true and correct.**

Signature of Joint Debtor: /s/ Christopher Michael Shafer

CHRISTOPHER MICHAEL SHAFER

Date: 28 OCTOBER 2008

**B6 Cover (Form 6 Cover) (12/07)**

## **FORM 6. SCHEDULES**

Summary of Schedules

Statistical Summary of Certain Liabilities and Related Data (28 U.S.C. § 159)

Schedule A - Real Property

Schedule B - Personal Property

Schedule C - Property Claimed as Exempt

Schedule D - Creditors Holding Secured Claims

Schedule E - Creditors Holding Unsecured Priority Claims

Schedule F - Creditors Holding Unsecured Nonpriority Claims

Schedule G - Executory Contracts and Unexpired Leases

Schedule H - Codebtors

Schedule I - Current Income of Individual Debtor(s)

Schedule J - Current Expenditures of Individual Debtor(s)

Unsworn Declaration under Penalty of Perjury

**GENERAL INSTRUCTIONS:** The first page of the debtor's schedules and the first page of any amendments thereto must contain a caption as in Form 16B. Subsequent pages should be identified with the debtor's name and case number. If the schedules are filed with the petition, the case number should be left blank

Schedules D, E, and F have been designed for the listing of each claim only once. Even when a claim is secured only in part or entitled to priority only in part, it still should be listed only once. A claim which is secured in whole or in part should be listed on Schedule D only, and a claim which is entitled to priority in whole or in part should be listed on Schedule E only. Do not list the same claim twice. If a creditor has more than one claim, such as claims arising from separate transactions, each claim should be scheduled separately.

Review the specific instructions for each schedule before completing the schedule.



In re Vanessa Leigh Shafer & Christopher Michael Shafer Case No. \_\_\_\_\_  
Debtor (If known)

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a co-tenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C – Property Claimed as Exempt.

| DESCRIPTION AND LOCATION OF PROPERTY                                | NATURE OF DEBTOR'S INTEREST IN PROPERTY | HUSBAND, WIFE, JOINT OR COMMUNITY | CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION | AMOUNT OF SECURED CLAIM |
|---|---|-----------------------------------|--|-------------------------|
| Single Family Residence<br>408 Kresswood Drive<br>McHenry. IL 60050 | Fee Simple                              | J                                 | 210,000.00   | 190,195.67              |
| Total ➤   |   |                                   | 210,000.00   |                         |

(Report also on Summary of Schedules.)

In re Vanessa Leigh Shafer & Christopher Michael Shafer Case No. \_\_\_\_\_  
**Debtor** (If known)

## SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "X" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

**Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.**

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See. 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

| TYPE OF PROPERTY  | N<br>O<br>N<br>E | DESCRIPTION AND LOCATION<br>OF PROPERTY   | HUSBAND, WIFE, JOINT<br>OR COMMUNITY | CURRENT VALUE OF<br>DEBTOR'S INTEREST<br>IN PROPERTY,<br>WITHOUT<br>DEDUCTING ANY<br>SECURED CLAIM<br>OR EXEMPTION |
|---|------------------|---|--------------------------------------|--|
| 1. Cash on hand.  | X                |   |                                      |  |
| 2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.                      |                  | Checking Account<br>McHenry Savings Bank<br>353 Bank Drive<br>McHenry, IL 60050 | J                                    | 1,000.00   |
| 3. Security deposits with public utilities, telephone companies, landlords, and others.   | X                |   |                                      |  |
| 4. Household goods and furnishings, including audio, video, and computer equipment.   |                  | Miscellaneous household goods and furnishings                                   | J                                    | 2,500.00   |
| 5. Books. Pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.   | X                |   |                                      |  |
| 6. Wearing apparel.   |                  | Miscellaneous wearing apparel   | J                                    | 1,000.00   |
| 7. Furs and jewelry.  | X                |   |                                      |  |
| 8. Firearms and sports, photographic, and other hobby equipment.  |                  | Miscellaneous sports equipment  | J                                    | 150.00   |
| 9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.  | X                |   |                                      |  |
| 10. Annuities. Itemize and name each issuer.  | X                |   |                                      |  |
| 11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).) | X                |   |                                      |  |
| 12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.   |                  | IRA   | J                                    | 0.00   |

In re Vanessa Leigh Shafer & Christopher Michael Shafer Case No. \_\_\_\_\_  
**Debtor** (If known)

**SCHEDULE B - PERSONAL PROPERTY**  
(Continuation Sheet)

| TYPE OF PROPERTY   | N<br>O<br>N<br>E | DESCRIPTION AND LOCATION<br>OF PROPERTY  | HUSBAND, WIFE, JOINT<br>OR COMMUNITY | CURRENT VALUE OF<br>DEBTOR'S INTEREST<br>IN PROPERTY,<br>WITHOUT<br>DEDUCTING ANY<br>SECURED CLAIM<br>OR EXEMPTION |
|--|------------------|--|--------------------------------------|--|
|  |                  | First Midwest Bank<br>3510 West Elm Street<br>McHenry, IL 60050                    |                                      |  |
|  |                  | Retirement Plan<br>Fidelity Investments<br>82 Devonshire Court<br>Boston, MA 02109 | W                                    | 0.00   |
| 13. Stock and interests in incorporated and unincorporated businesses. Itemize.  | X                |  |                                      |  |
| 14. Interests in partnerships or joint ventures. Itemize.  | X                |  |                                      |  |
| 15. Government and corporate bonds and other negotiable and non-negotiable instruments.  | X                |  |                                      |  |
| 16. Accounts receivable.   | X                |  |                                      |  |
| 17. Alimony, maintenance, support, and property settlement to which the debtor is or may be entitled. Give particulars.  | X                |  |                                      |  |
| 18. Other liquidated debts owing debtor including tax refunds. Give particulars.   | X                |  |                                      |  |
| 19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.       | X                |  |                                      |  |
| 20. Contingent and noncontingent interests in estate or a decedent, death benefit plan, life insurance policy, or trust.   | X                |  |                                      |  |
| 21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights of setoff claims. Give estimated value of each. | X                |  |                                      |  |
| 22. Patents, copyrights, and other intellectual property. Give particulars.  | X                |  |                                      |  |
| 23. Licenses, franchises, and other general intangibles. Give particulars.   | X                |  |                                      |  |

In re Vanessa Leigh Shafer & Christopher Michael Shafer Case No. \_\_\_\_\_  
**Debtor** (If known)

## SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

| TYPE OF PROPERTY   | N<br>O<br>N<br>E | DESCRIPTION AND LOCATION<br>OF PROPERTY    | HUSBAND, WIFE, JOINT<br>OR COMMUNITY | CURRENT VALUE OF<br>DEBTOR'S INTEREST<br>IN PROPERTY,<br>WITHOUT<br>DEDUCTING ANY<br>SECURED CLAIM<br>OR EXEMPTION |
|--|------------------|--|--------------------------------------|--|
| 24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. §101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes. | X                |  |                                      |  |
| 25. Automobiles, trucks, trailers, and other vehicles and accessories.   |                  | 2004 Dodge Grand Caravan<br>2006 Ford F150 | W<br>H                               | 8,525.00<br>22,000.00  |
| 26. Boats, motors, and accessories.  | X                |  |                                      |  |
| 27. Aircraft and accessories.  | X                |  |                                      |  |
| 28. Office equipment, furnishings, and supplies.   |                  | Computer/Printer                           | J                                    | 650.00   |
| 29. Machinery, fixtures, equipment, and supplies used in business.   |                  | Tools                                      | H                                    | 100.00   |
| 30. Inventory.   | X                |  |                                      |  |
| 31. Animals.   | X                |  |                                      |  |
| 32. Crops - growing or harvested. Give particulars.  | X                |  |                                      |  |
| 33. Farming equipment and implements.  | X                |  |                                      |  |
| 34. Farm supplies, chemicals, and feed.  | X                |  |                                      |  |
| 35. Other personal property of any kind not already listed. Itemize.   | X                |  |                                      |  |
| 0 continuation sheets attached Total   |                  |  |                                      | \$ 35,925.00   |

(Include amounts from any continuation sheets attached. Report total also on Summary of Schedules.)

In re Vanessa Leigh Shafer &amp; Christopher Michael Shafer

Case No. \_\_\_\_\_

Debtor

(If known)

**SCHEDULE C - PROPERTY CLAIMED AS EXEMPT**Debtor claims the exemptions to which debtor is entitled under:  
(Check one box)☐ 11 U.S.C. § 522(b)(2)☐ Check if debtor claims a homestead exemption that exceeds  
\$136,875.☒ 11 U.S.C. § 522(b)(3)

| DESCRIPTION OF PROPERTY                       | SPECIFY LAW PROVIDING EACH EXEMPTION                             | VALUE OF CLAIMED EXEMPTION | CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTION |
|---|--|----------------------------|---|
| Single Family Residence                       | (Husb)735 I.L.C.S 5§12-901<br>(Wife)735 I.L.C.S 5§12-901         | 15,000.00<br>15,000.00     | 210,000.00  |
| Checking Account                              | (Husb)735 I.L.C.S 5§12-1001(b)<br>(Wife)735 I.L.C.S 5§12-1001(b) | 500.00<br>500.00           | 1,000.00  |
| Miscellaneous household goods and furnishings | (Husb)735 I.L.C.S 5§12-1001(b)<br>(Wife)735 I.L.C.S 5§12-1001(b) | 1,250.00<br>1,250.00       | 2,500.00  |
| Miscellaneous wearing apparel                 | (Husb)735 I.L.C.S 5§12-1001(a)<br>(Wife)735 I.L.C.S 5§12-1001(a) | 500.00<br>500.00           | 1,000.00  |
| Miscellaneous sports equipment                | (Husb)735 I.L.C.S 5§12-1001(b)<br>(Wife)735 I.L.C.S 5§12-1001(b) | 75.00<br>75.00             | 150.00  |
| Retirement Plan                               | (Wife)735 I.L.C.S 5§12-1006                                      | 0.00                       | 0.00  |
| 2004 Dodge Grand Caravan                      | (Wife)735 I.L.C.S 5§12-1001(c)                                   | 0.00                       | 8,525.00  |
| 2006 Ford F150                                | (Husb)735 I.L.C.S 5§12-1001(c)                                   | 0.00                       | 22,000.00   |
| Tools   | (Husb)735 I.L.C.S 5§12-1001(d)                                   | 100.00                     | 100.00  |

**B6D (Official Form 6D) (12/07)**In re Vanessa Leigh Shafer & Christopher Michael Shafer

Case No. \_\_\_\_\_

Debtor

(If known)

**SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS**

State the name, mailing address, including zip code and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See Instructions Above.)                           | CODEBTOR<br>HUSBAND, WIFE, JOINT<br>OR COMMUNITY | DATE CLAIM WAS INCURRED,<br>NATURE OF LIEN, AND<br>DESCRIPTION AND<br>VALUE OF PROPERTY<br>SUBJECT TO LIEN | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT<br>OF<br>CLAIM<br>WITHOUT<br>DEDUCTING<br>VALUE OF<br>COLLATERAL | UNSECURED<br>PORTION,<br>IF ANY |
|---|--|--|------------|--------------|----------|---|---------------------------------|
| ACCOUNT NO. 03135602<br>American General Finance<br>PO Box 790368<br>St. Louis, MO 63179-0368   | J  | Lien: PMSI in vehicle < 910 days<br>Security: 2004 Dodge Grand<br>Caravan<br><br>VALUE \$ 8,525.00         |            |              |          | 11,247.03   | 2,722.03                        |
| ACCOUNT NO. 154 9122 31743<br>GM Automobile Financing<br>PO Box 9001951<br>Louisville, KY 40290   | X  | Incurred: 02-2008<br>Lien: Automobile Loan<br>Security: 2006 Ford F150<br><br>VALUE \$ 22,000.00           |            |              |          | 25,887.69   | 3,887.69                        |
| ACCOUNT NO.<br>Kevin Bruning & Associates<br>o/b/o Kresswood Trails Homeowners<br>Assn.<br>333 Commerce Drive<br>Crystal Lake, IL 60014 | J  | Lien: Association Dues<br>Security: Debtors Residence<br><br>VALUE \$ 210,000.00                           |            |              |          | 5,300.00  | 0.00                            |
| Subtotal (Total of this page) <span style="float: right;">➤</span>  |  |  |            |              |          | \$ 42,434.72  | \$ 6,609.72                     |
| Total (Use only on last page) <span style="float: right;">➤</span>  |  |  |            |              |          | \$  | \$                              |

1 continuation sheets attached

(Report also on  
Summary of Schedules)

(If applicable, report  
also on Statistical  
Summary of Certain  
Liabilities and Related  
Data.)

B6D (Official Form 6D) (12/07) – Cont.

In re Vanessa Leigh Shafer & Christopher Michael Shafer,

Case No. \_\_\_\_\_

Debtor

(If known)

## SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See Instructions Above.) | CODEBTOR<br>HUSBAND, WIFE, JOINT<br>OR COMMUNITY | DATE CLAIM WAS INCURRED,<br>NATURE OF LIEN, AND<br>DESCRIPTION AND<br>VALUE OF PROPERTY<br>SUBJECT TO LIEN | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT<br>OF<br>CLAIM<br>WITHOUT<br>DEDUCTING<br>VALUE OF<br>COLLATERAL | UNSECURED<br>PORTION,<br>IF ANY |
|---|--|--|------------|--------------|----------|---|---------------------------------|
| ACCOUNT NO. 301454275   | J  | Lien: 1st Mortgage<br>Security: Debtors Residence  |            |              |          | 184,895.67  | 0.00                            |
| Washington Mutual Home Loans<br>1301 Second Avenue<br>Seattle, WA 98101                                       |  | VALUE \$ 210,000.00  |            |              |          |   |                                 |
| ACCOUNT NO.   |  |  |            |              |          |   |                                 |
|   |  | VALUE \$   |            |              |          |   |                                 |
| ACCOUNT NO.   |  |  |            |              |          |   |                                 |
|   |  | VALUE \$   |            |              |          |   |                                 |
| ACCOUNT NO.   |  |  |            |              |          |   |                                 |
|   |  | VALUE \$   |            |              |          |   |                                 |
| ACCOUNT NO.   |  |  |            |              |          |   |                                 |
|   |  | VALUE \$   |            |              |          |   |                                 |
| ACCOUNT NO.   |  |  |            |              |          |   |                                 |
|   |  | VALUE \$   |            |              |          |   |                                 |

Sheet no. 1 of 1 continuation sheets attached to  
Schedule of Creditors Holding Secured Claims

|   |               |             |
|---|---------------|-------------|
| Subtotal (s)<br>(Total(s) of this page) | \$ 184,895.67 | \$ 0.00     |
| Total(s)<br>(Use only on last page)     | \$ 227,330.39 | \$ 6,609.72 |

(Report also on  
Summary of Schedules)

(If applicable, report  
also on Statistical  
Summary of Certain  
Liabilities and Related  
Data.)

**B6E (Official Form 6E) (12/07)**

In re Vanessa Leigh Shafer & Christopher Michael Shafer,  
Debtor

Case No. \_\_\_\_\_  
(if known)

**SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS**

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed.R.Bankr.P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether husband, wife, both of them or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☒ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

**TYPES OF PRIORITY CLAIMS** (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

☐ **Domestic Support Obligations**

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

☐ **Extensions of credit in an involuntary case**

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

☐ **Wages, salaries, and commissions**

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950\* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

☐ **Contributions to employee benefit plans**

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).



**B6E (Official Form 6E) (12/07) - Cont.**

In re Vanessa Leigh Shafer & Christopher Michael Shafer,  
Debtor

Case No. \_\_\_\_\_  
(if known)

☐ **Certain farmers and fishermen**

Claims of certain farmers and fishermen, up to \$5,400\* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

☐ **Deposits by individuals**

Claims of individuals up to \$2,425\* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

☐ **Taxes and Certain Other Debts Owed to Governmental Units**

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

☐ **Commitments to Maintain the Capital of an Insured Depository Institution**

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).

☐ **Claims for Death or Personal Injury While Debtor Was Intoxicated**

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

\* Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

0 continuation sheets attached

B6F (Official Form 6F) (12/07)

In re Vanessa Leigh Shafer & Christopher Michael Shafer

Case No. \_\_\_\_\_

Debtor

(If known)

## SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.)                      | CODEBTOR<br>HUSBAND, WIFE, JOINT<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM.<br>IF CLAIM IS SUBJECT TO SETOFF,<br>SO STATE. | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT<br>OF<br>CLAIM            |
|--|--|--|------------|--------------|----------|----------------------------------|
| ACCOUNT NO. 66044<br>A&R Concepts<br>o/b/o McHenry Radiology<br>33 W. Higgins Road, Ste 715<br>S Barrington IL 60010               | H  | Consideration: Medical services  |            |              |          | Notice Only                      |
| ACCOUNT NO. 34840<br>A/R Concepts, Inc.<br>o/b/o Anesthesia Associates<br>33 W. Higgins Road, Ste 715<br>S. Barrington, IL 60010   | H  | Consideration: Medical services  |            |              |          | Notice Only                      |
| ACCOUNT NO. B0531200423<br>A/R Concepts, Inc.<br>o/b/o McHenry Radiology<br>33 W. Higgins Road, Ste 715<br>S. Barrington, IL 60010 |  | Consideration: Medical services  |            |              |          | Notice Only                      |
| ACCOUNT NO. B0405600191<br>A/R Concepts, Inc.<br>o/b/o McHenry Radiology<br>33 W. Higgins Road, Ste 715<br>S. Barrington, IL 60010 | W  | Consideration: Medical services  |            |              |          | Notice Only                      |
| <div>25 continuation sheets attached</div> <div>Subtotal</div> <div>Total</div>  |  |  |            |              |          | <div>\$ 0.00</div> <div>\$</div> |

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Vanessa Leigh Shafer & Christopher Michael Shafer,  
Debtor

Case No. \_\_\_\_\_  
(If known)

**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.)               | CODEBTOR<br>HUSBAND, WIFE, JOINT<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM.<br>IF CLAIM IS SUBJECT TO SETOFF, | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT<br>OF<br>CLAIM |
|---|--|---|------------|--------------|----------|-----------------------|
| ACCOUNT NO. 506928<br>ACC International<br>o/b/o Goldberg & Chudwin<br>919 Estes Court<br>Schaumburg, IL 60193              | H  | Consideration: Medical services   |            |              |          | Notice Only           |
| ACCOUNT NO. 664388<br>ACC International<br>o/b/o LaSalle Bank<br>919 Estes Court<br>Schaumburg, IL 60193                    | H  | Consideration: Bank Overdraft   |            |              |          | Notice Only           |
| ACCOUNT NO. 664386<br>ACC International<br>o/b/o LaSalle Bank<br>919 Estes Court<br>Schaumburg, IL 60193                    | H  | Consideration: Bank Overdraft   |            |              |          | Notice Only           |
| ACCOUNT NO. 1362947803417<br>Accent<br>o/b/o Guardian Lift Insurance<br>7171 Mercy Road<br>Omaha, NE 68106-5004             | W  | Consideration: Medical services   |            |              |          | 92.50                 |
| ACCOUNT NO. 67673<br>Activity Collection<br>o/b/o Fritz Family Dental<br>664 Milwaukee Avenue<br>Prospect Heights, IL 60070 |  | Consideration: Medical services   |            |              |          | Notice Only           |

Sheet no. 1 of 25 continuation sheets attached  
to Schedule of Creditors Holding Unsecured  
Nonpriority Claims

|          |          |
|----------|----------|
| Subtotal | \$ 92.50 |
| Total    | \$       |

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Vanessa Leigh Shafer & Christopher Michael Shafer,  
Debtor

Case No. \_\_\_\_\_  
(If known)

## SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.) | CODEBTOR<br>HUSBAND, WIFE, JOINT<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM.<br>IF CLAIM IS SUBJECT TO SETOFF, | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT<br>OF<br>CLAIM |
|---|--|---|------------|--------------|----------|-----------------------|
| ACCOUNT NO. 603162421<br>Advocate Good Shepherd Hospital<br>PO Box 70014<br>Chicago, IL 60673-0014            | W  | Consideration: Medical services   |            |              |          | 131.50                |
| ACCOUNT NO. 60522657-0<br>Advocate Good Shepherd Hospital<br>PO Box 70014<br>Chicago, IL 60673-0014           | W  | Consideration: Medical services   |            |              |          | 1,540.00              |
| ACCOUNT NO. 320220130<br>Advocate Lutheran General<br>1775 Dempster Street<br>Park Ridge, IL 60068            | W  | Consideration: Medical services   |            |              |          | 163.80                |
| ACCOUNT NO. AIG4352513<br>AIG<br>PO Box 182<br>Alpharetta, GA 30023   | W  | Consideration: Insurance  |            |              |          | 245.43                |
| ACCOUNT NO. 50537641<br>Alliant Law Group<br>o/b/o AT&T<br>2860 Zanker Road, Ste 105<br>San Jose, CA 95134    | H  | Consideration: Phone Service  |            |              |          | Notice Only           |

Sheet no. 2 of 25 continuation sheets attached  
to Schedule of Creditors Holding Unsecured  
Nonpriority Claims

Subtotal > \$ 2,080.73

Total > \$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Vanessa Leigh Shafer & Christopher Michael Shafer,  
Debtor

Case No. \_\_\_\_\_  
(If known)

**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.)               | CODEBTOR<br>HUSBAND, WIFE, JOINT<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM.<br>IF CLAIM IS SUBJECT TO SETOFF, | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT<br>OF<br>CLAIM |
|---|--|---|------------|--------------|----------|-----------------------|
| ACCOUNT NO. 345785652<br>American Collection System<br>o/b/o H&R Block<br>PO Box 29117<br>Columbus, OH 43229-0117           | H  | Consideration: Tax Account Services   |            |              |          | Notice Only           |
| ACCOUNT NO. 2245<br>Americash Loans<br>4213 W. Elm Street<br>McHenry, IL 60050  | W  | Consideration: Personal loan  |            |              |          | 1,260.56              |
| ACCOUNT NO. 34840<br>Anesthesia Associates of Crystal<br>Valley<br>4309 Medical Center Drive, Ste A201<br>McHenry, IL 60050 | H  | Consideration: Medical services   |            |              |          | 285.00                |
| ACCOUNT NO. 1344711<br>Associated Collectors<br>o/b/o Axis Publishing<br>PO Box 1039<br>Janesville, WI 53547                | H  | Consideration: Advertising  |            |              |          | Notice Only           |
| ACCOUNT NO. 8153638726308<br>AT&T<br>PO Box 68055<br>Anaheim Hills, CA 92817-8055   | H  | Consideration: Business Phone   |            |              |          | 383.23                |

Sheet no. 3 of 25 continuation sheets attached  
to Schedule of Creditors Holding Unsecured  
Nonpriority Claims

Subtotal > \$ 1,928.79

Total > \$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Vanessa Leigh Shafer & Christopher Michael Shafer,  
Debtor

Case No. \_\_\_\_\_  
(If known)

**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.) | CODEBTOR<br>HUSBAND, WIFE, JOINT<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM.<br>IF CLAIM IS SUBJECT TO SETOFF, | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT<br>OF<br>CLAIM |
|---|--|---|------------|--------------|----------|-----------------------|
| ACCOUNT NO.<br>Axis Publishing<br>6856 W. Gate Road<br>Roscoe, IL 61073                                       | H  | Consideration: Advertising  |            |              |          | 86.07                 |
| ACCOUNT NO. 305306326082<br>Bank of America<br>1904 Richmond Road<br>McHenry, IL 60050                        | W  | Consideration: Overdraft Fee  |            |              |          | 643.84                |
| ACCOUNT NO. 002910238096<br>Bank of America<br>2400 Richmond Road<br>McHenry, IL 60050                        | H  | Consideration: Overdraft Fee  |            |              |          | 1,298.28              |
| ACCOUNT NO. 1118KSB<br>Barrington Anesthesiology<br>8135 N. Milwaukee Avenue<br>Niles, IL 60714               | W  | Consideration: Medical services   |            |              |          | 105.60                |
| ACCOUNT NO. 1304<br>Barrington OB/GYN Associates<br>27790 W. Hwy 22 #32<br>Barrington, IL 60010               | W  | Consideration: Medical services   |            |              |          | 196.40                |

Sheet no. 4 of 25 continuation sheets attached  
to Schedule of Creditors Holding Unsecured  
Nonpriority Claims

Subtotal > \$ 2,330.19

Total > \$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Vanessa Leigh Shafer & Christopher Michael Shafer,  
Debtor

Case No. \_\_\_\_\_  
(If known)

## SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.)  | CODEBTOR<br>HUSBAND, WIFE, JOINT<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM.<br>IF CLAIM IS SUBJECT TO SETOFF, | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT<br>OF<br>CLAIM |
|--|--|---|------------|--------------|----------|-----------------------|
| ACCOUNT NO. 4548<br>Barrington OB/GYN Associates<br>27790 W. Hwy 22 #32<br>Barrington, IL 60010                | W  | Consideration: Medical services   |            |              |          | 26.20                 |
| ACCOUNT NO. 14097318<br>Bernett & DeLoney<br>o/b/o Home Depot<br>1265 E. Fort Union Blvd<br>Mildvale, VT 84047 |  | Consideration: NSF check  |            |              |          | Notice Only           |
| ACCOUNT NO. 1382663<br>Bernett & DeLoney<br>o/b/o Home Depot<br>1265 E. Fort Union Blvd<br>Mildvale, VT 84047  | H  | Consideration: NSF checks   |            |              |          | Notice Only           |
| ACCOUNT NO.<br>Cardinal Fitness<br>2210 W. Route 31<br>McHenry, IL 60050                                       | W  | Consideration: Health Services  |            |              |          | 104.85                |
| ACCOUNT NO. A98444<br>Centegra HBH<br>970 S. McHenry Avenue<br>Crystal Lake, IL 60014                          | H  | Consideration: Medical services   |            |              |          | 240.20                |

Sheet no. 5 of 25 continuation sheets attached  
to Schedule of Creditors Holding Unsecured  
Nonpriority Claims

Subtotal \$ 371.25

Total \$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Vanessa Leigh Shafer & Christopher Michael Shafer,  
Debtor

Case No. \_\_\_\_\_  
(If known)

## SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.)          | CODEBTOR<br>HUSBAND, WIFE, JOINT<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM.<br>IF CLAIM IS SUBJECT TO SETOFF, | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT<br>OF<br>CLAIM |
|--|--|---|------------|--------------|----------|-----------------------|
| ACCOUNT NO. A95199<br>Centegra HBH<br>970 S. McHenry Avenue<br>Crystal Lake, IL 60014                                  | W  | Consideration: Medical services   |            |              |          | 318.20                |
| ACCOUNT NO. B0405600191<br>Centegra HBH<br>970 S. McHenry Avenue<br>Crystal Lake, IL 60014                             | W  | Consideration: Medical services   |            |              |          | 430.50                |
| ACCOUNT NO. 71377986<br>Centegra NIMC<br>PO Box 17<br>Arrowsmith, IL 61722-0017  | W  | Consideration: Medical services   |            |              |          | 75.00                 |
| ACCOUNT NO. 1307043<br>Certified Services<br>o/b/o Condell Medical Center<br>PO Box 177<br>Waukegan, IL 60079-0177     |  | Consideration: Medical services   |            |              |          | Notice Only           |
| ACCOUNT NO. 64772<br>Certified Services<br>o/b/o Fox Valley Internal Medicine<br>PO Box 177<br>Waukegan, IL 60079-0177 | W  | Consideration: Medical services   |            |              |          | Notice Only           |

Sheet no. 6 of 25 continuation sheets attached  
to Schedule of Creditors Holding Unsecured  
Nonpriority Claims

Subtotal > \$ 823.70

Total > \$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)



B6F (Official Form 6F) (12/07) - Cont.

In re Vanessa Leigh Shafer & Christopher Michael Shafer,  
Debtor

Case No. \_\_\_\_\_  
(If known)

**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.)                | CODEBTOR<br>HUSBAND, WIFE, JOINT<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM.<br>IF CLAIM IS SUBJECT TO SETOFF, | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT<br>OF<br>CLAIM |
|--|--|---|------------|--------------|----------|-----------------------|
| ACCOUNT NO. 424321127880<br>Chase Paymentech Solutions<br>5251 Westheimer 6th Floor<br>Houston, TX 77056                     | H  | Consideration: Credit card processing   |            |              |          | 260.00                |
| ACCOUNT NO. 1307043<br>Condell Medical Center<br>755 S. Milwaukee Avenue, Ste 127<br>Libertyville, IL 60048                  | W  | Consideration: Medical services   |            |              |          | 286.56                |
| ACCOUNT NO. 1304<br>Credit Management Srvices<br>o/b/o Barrington OB/GYN<br>9525 Sweet Valley Drive<br>Valley View, OH 44125 | W  | Consideration: Medical services   |            |              |          | Notice Only           |
| ACCOUNT NO.<br>D&B Receivables Management<br>o/b/o Microsoft<br>PO Box 12850<br>Tucson, AZ 85732-2850                        | W  | Consideration: Publications   |            |              |          | Notice Only           |
| ACCOUNT NO. 14920952<br>DirectV<br>PO Box 9001069<br>Louisville, KY 40290-1069   | W  | Consideration: TV   |            |              |          | 277.53                |

Sheet no. 7 of 25 continuation sheets attached  
to Schedule of Creditors Holding Unsecured  
Nonpriority Claims

|          |    |        |
|----------|----|--------|
| Subtotal | \$ | 824.09 |
| Total    | \$ |        |

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Vanessa Leigh Shafer & Christopher Michael Shafer,  
Debtor

Case No. \_\_\_\_\_  
(If known)

**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.)                    | CODEBTOR<br>HUSBAND, WIFE, JOINT<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM.<br>IF CLAIM IS SUBJECT TO SETOFF, | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT<br>OF<br>CLAIM |
|--|--|---|------------|--------------|----------|-----------------------|
| ACCOUNT NO. 601101e4345314155<br>Discover<br>PO Box 30395<br>Salt Lake City, UT 84130  | H  | Consideration: Credit Processing  |            |              |          | 128.50                |
| ACCOUNT NO. 1975534<br>Disney Movie Club<br>PO Box 758<br>Neenah, WI 54957   | W  | Incurred: `<br>Consideration: Movie   |            |              |          | 99.74                 |
| ACCOUNT NO.<br>Dr. Brian Wu<br>6317 Northwest Highway<br>Crystal Lake, IL 60014  | W  | Consideration: Medical services   |            |              |          | 177.84                |
| ACCOUNT NO. 12146<br>Dr. Gary Oberg<br>31 N. Virginia Street<br>Crystal Lake, IL 60014   | W  | Consideration: Medical services   |            |              |          | 119.08                |
| ACCOUNT NO. 599523<br>FFCC -Columbus, Inc.<br>o/b/o Dr. Gary Oberg<br>1550 Old Henderson Rd. Ste 100<br>Columbus,. OH 43220-3626 | W  | Consideration: Medical services   |            |              |          | 119.08                |

Sheet no. 8 of 25 continuation sheets attached  
to Schedule of Creditors Holding Unsecured  
Nonpriority Claims

Subtotal > \$ 644.24

Total > \$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Vanessa Leigh Shafer & Christopher Michael Shafer,  
Debtor

Case No. \_\_\_\_\_  
(If known)

## SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.)                          | CODEBTOR<br>HUSBAND, WIFE, JOINT<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM.<br>IF CLAIM IS SUBJECT TO SETOFF, | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT<br>OF<br>CLAIM |
|--|--|---|------------|--------------|----------|-----------------------|
| ACCOUNT NO. A98444<br>Financial Control Solutions<br>o/b/o Centegra HBH<br>PO Box 668<br>Germantown, WI 53022-0668                     | H  | Consideration: Medical services   |            |              |          | Notice Only           |
| ACCOUNT NO. 00140791-06<br>First Midwest Joliet<br>50 W. Jefferson Street<br>Joliet, IL 60432  | W  | Consideration: Bank Fees  |            |              |          | 206.50                |
| ACCOUNT NO. 64772<br>Fox Valley Internal Medicine<br>650 Dakota Street<br>Crystal Lake, IL 60014                                       | W  | Consideration: Medical services   |            |              |          | Notice Only           |
| ACCOUNT NO. 178407<br>Frank M. Bonifacic, Atty at Law<br>o/b/o Marengo Disposal<br>111 W. Washington St, Ste 1850<br>Chicago, IL 60602 | H  | Consideration: garbage removal  |            |              |          | Notice Only           |
| ACCOUNT NO. 506928<br>Goldberg & Chudwin, MD<br>5911 Northwest Hwy<br>Crystal Lake, IL 60014   | H  | Consideration: Medical services   |            |              |          | 370.00                |

Sheet no. 9 of 25 continuation sheets attached  
to Schedule of Creditors Holding Unsecured  
Nonpriority Claims

Subtotal > \$ 576.50

Total > \$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Vanessa Leigh Shafer & Christopher Michael Shafer,  
Debtor

Case No. \_\_\_\_\_  
(If known)

**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.)          | CODEBTOR<br>HUSBAND, WIFE, JOINT<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM.<br>IF CLAIM IS SUBJECT TO SETOFF, | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT<br>OF<br>CLAIM |
|--|--|---|------------|--------------|----------|-----------------------|
| ACCOUNT NO. 345785652<br>H & R Block<br>5102 W. Elm Street<br>McHenry, IL 60050  | H  | Consideration: Preparation of Tax Return  |            |              |          | 434.00                |
| ACCOUNT NO.<br>H&R Accounts<br>o/b/o Centegra Illinois Medical Center<br>7017 John Deere Parkway<br>Moline, IL 61265   | W  | Consideration: Medical services   |            |              |          | Notice Only           |
| ACCOUNT NO. B0405600191<br>Harris & Harris<br>o/b/o Sherman Hospital<br>600 W. Jackson Blvd.<br>Chicago, IL 60661-5636 | W  | Consideration: Medical services   |            |              |          | Notice Only           |
| ACCOUNT NO. 1118KSB<br>Harvard Collection<br>o/b/o Barrington Anesthesia<br>4839 N. Elston Avenue<br>Chicago, IL 60630 | W  | Consideration: Medical services   |            |              |          | Notice Only           |
| ACCOUNT NO.<br>Hodges University<br>2655 Northbrooke Drice<br>Naples. FL 34119   | W  | Consideration: Tuition  |            |              |          | 3,710.00              |

Sheet no. 10 of 25 continuation sheets attached  
to Schedule of Creditors Holding Unsecured  
Nonpriority Claims

Subtotal > \$ 4,144.00

Total > \$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Vanessa Leigh Shafer & Christopher Michael Shafer,  
Debtor

Case No. \_\_\_\_\_  
(If known)

## SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.)              | CODEBTOR<br>HUSBAND, WIFE, JOINT<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM.<br>IF CLAIM IS SUBJECT TO SETOFF, | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT<br>OF<br>CLAIM |
|--|--|---|------------|--------------|----------|-----------------------|
| ACCOUNT NO. 180052356<br>Home Depot<br>493 N. Milwaukee Avenue<br>Vernon Hills, IL 60061                                   | H  | Consideration: NSF check  |            |              |          | 61.25                 |
| ACCOUNT NO. 179650436<br>Home Depot<br>655 Lake Cook Road<br>Deerfield, IL 60015   | H  | Consideration: NSF check  |            |              |          | 1,105.75              |
| ACCOUNT NO. 336761562<br>Illinois Department of Revenue<br>100 W. Randolph Street, Ste 7-339<br>Chicago, IL 60601          | J  | Consideration: Income Taxes   |            |              |          | 989.11                |
| ACCOUNT NO. M3498B146198<br>Johnson & Associates<br>o/b/o Marengo & Disposal<br>PO Box 2747<br>Bloomington, IL 61702       | W  | Consideration: Garbage  |            |              |          | 66.45                 |
| ACCOUNT NO. 373010<br>KCA Financial Service<br>o/b/o Town Square Anesthesiologists<br>628 North Street<br>Geneva, IL 60134 | W  | Consideration: Medical services   |            |              |          | Notice Only           |

Sheet no. 11 of 25 continuation sheets attached  
to Schedule of Creditors Holding Unsecured  
Nonpriority Claims

Subtotal > \$ 2,222.56

Total > \$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Vanessa Leigh Shafer & Christopher Michael Shafer,  
Debtor

Case No. \_\_\_\_\_  
(If known)

## SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.)     | CODEBTOR<br>HUSBAND, WIFE, JOINT<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM.<br>IF CLAIM IS SUBJECT TO SETOFF, | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT<br>OF<br>CLAIM |
|---|--|---|------------|--------------|----------|-----------------------|
| ACCOUNT NO.<br>Key Financial Services<br>o/b/o MHS Physicians<br>5315 Wall Street, Suite 170<br>Madison, WI 53718 | W  | Consideration: Medical services   |            |              |          | Notice Only           |
| ACCOUNT NO. 404-2-000571348<br>Lake/McHenry Pathology Assoc.<br>520 E. 22nd Street<br>Lombard, IL 60148           | W  | Consideration: Medical services   |            |              |          | 96.20                 |
| ACCOUNT NO. 404-1-000060302<br>Lake/McHenry Pathology Assoc.<br>520 E. 22nd Street<br>Lombard, IL 60148           | H  | Consideration: Medical services   |            |              |          | 95.00                 |
| ACCOUNT NO. 404-1-000503417<br>Lake/McHenry Pathology Assoc.<br>520 E. 22nd Street<br>Lombard, IL 60148           | W  | Consideration: Medical services   |            |              |          | 145.00                |
| ACCOUNT NO. 404-1-0000604844<br>Lake/McHenry Pathology Assoc.<br>520 E. 22nd Street<br>Lombard, IL 60148          | H  | Consideration: Medical services   |            |              |          | 145.00                |

Sheet no. 12 of 25 continuation sheets attached  
to Schedule of Creditors Holding Unsecured  
Nonpriority Claims

Subtotal > \$ 481.20

Total > \$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Vanessa Leigh Shafer & Christopher Michael Shafer,  
Debtor

Case No. \_\_\_\_\_  
(If known)

## SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.) | CODEBTOR<br>HUSBAND, WIFE, JOINT<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM.<br>IF CLAIM IS SUBJECT TO SETOFF, | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT<br>OF<br>CLAIM |
|---|--|---|------------|--------------|----------|-----------------------|
| ACCOUNT NO. 404-0000503417<br>Lake/McHenry Pathology Assoc.<br>520 E. 22nd Street<br>Lombard, IL 60148        | W  | Consideration: Medical services   |            |              |          | 43.68                 |
| ACCOUNT NO. 404-2-0000604844<br>Lake/McHenry Pathology Assoc.<br>520 E. 22nd Street<br>Lombard, IL 60148      | H  | Consideration: Medical services   |            |              |          | 34.58                 |
| ACCOUNT NO. 404-1-0000606302<br>Lake/McHenry Pathology Assoc.<br>520 E. 22nd Street<br>Lombard, IL 60148      | H  | Consideration: Medical services   |            |              |          | 19.00                 |
| ACCOUNT NO. 664388<br>LaSalle Bank<br>1904 N. Richmond Road<br>McHenry, IL 60050                              | H  | Consideration: Bank Overdraft   |            |              |          | 518.06                |
| ACCOUNT NO. 664386<br>LaSalle Bank<br>1904 N. Richmond Road<br>McHenry, IL 60050                              | H  | Consideration: Bank Overdraft   |            |              |          | 653.00                |

Sheet no. 13 of 25 continuation sheets attached  
to Schedule of Creditors Holding Unsecured  
Nonpriority Claims

Subtotal > \$ 1,268.32

Total > \$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Vanessa Leigh Shafer & Christopher Michael Shafer,  
Debtor

Case No. \_\_\_\_\_  
(If known)

## SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.) | CODEBTOR<br>HUSBAND, WIFE, JOINT<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM.<br>IF CLAIM IS SUBJECT TO SETOFF, | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT<br>OF<br>CLAIM |
|---|--|---|------------|--------------|----------|-----------------------|
| ACCOUNT NO. NR0503-CCC-009106<br>Lifetouch<br>957 Springhill Avenue<br>Mobile, AL 36604                       | W  | Consideration: Photos   |            |              |          | 59.95                 |
| ACCOUNT NO. 60050CMSCN40808<br>LTD Commodities<br>2800 lakeside Drive<br>Bannockburn,. IL 60015               | W  | Consideration: Credit card debt   |            |              |          | 268.64                |
| ACCOUNT NO. 178407<br>Marengo Disposal<br>1050 Greenlee Street<br>Marengo, IL 60152                           | H  | Consideration: Garbage  |            |              |          | 203.39                |
| ACCOUNT NO. 178407<br>Marengo Disposal<br>1050 Greenlee Street<br>Marengo, IL 60152                           | W  | Consideration: Garbage  |            |              |          | 66.46                 |
| ACCOUNT NO. CMS1<br>McHenry County College<br>8900 Route 14<br>Crystal Lake, IL 60014                         | H  | Consideration: NSF Checks   |            |              |          | 112.29                |

Sheet no. 14 of 25 continuation sheets attached  
to Schedule of Creditors Holding Unsecured  
Nonpriority Claims

Subtotal > \$ 710.73

Total > \$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)



B6F (Official Form 6F) (12/07) - Cont.

In re Vanessa Leigh Shafer & Christopher Michael Shafer,  
Debtor

Case No. \_\_\_\_\_  
(If known)

## SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.) | CODEBTOR<br>HUSBAND, WIFE, JOINT<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM.<br>IF CLAIM IS SUBJECT TO SETOFF, | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT<br>OF<br>CLAIM |
|---|--|---|------------|--------------|----------|-----------------------|
| ACCOUNT NO. 14-03-181-009<br>McHenry County Treasurer<br>667 Ware Road, Room 100<br>Woodstock, IL 60098       | J  | Consideration: Property Taxes   |            |              |          | 4,650.08              |
| ACCOUNT NO. B0531200423<br>McHenry Radiologists<br>PO Box 220<br>McHenry, IL 60050                            | W  | Consideration: Medical services   |            |              |          | 45.00                 |
| ACCOUNT NO. B0405600191<br>McHenry Radiologists<br>PO Box 220<br>McHenry, IL 60050                            | W  | Consideration: Medical services   |            |              |          | 73.00                 |
| ACCOUNT NO. 66044<br>McHenry Radiologists<br>PO Box 220<br>McHenry, IL 60050                                  | H  | Consideration: Medical services   |            |              |          | 267.00                |
| ACCOUNT NO. 66044-QMRIG<br>McHenry Radiologists<br>PO Box 220<br>McHenry, IL 60050                            | H  | Consideration: Medical services   |            |              |          | 48.00                 |

Sheet no. 15 of 25 continuation sheets attached  
to Schedule of Creditors Holding Unsecured  
Nonpriority Claims

Subtotal > \$ 5,083.08

Total > \$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Vanessa Leigh Shafer & Christopher Michael Shafer,  
Debtor

Case No. \_\_\_\_\_  
(If known)

**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.)                              | CODEBTOR<br>HUSBAND, WIFE, JOINT<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM.<br>IF CLAIM IS SUBJECT TO SETOFF, | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT<br>OF<br>CLAIM |
|--|--|---|------------|--------------|----------|-----------------------|
| ACCOUNT NO. 5584092<br>Medical Recovery Specialists<br>o/b/o Advocate Good Shepherd<br>2200 E. Devon Ave, Ste 288<br>Des Plaines, IL 60018 | W  | Consideration: Medical services   |            |              |          | Notice Only           |
| ACCOUNT NO.<br>Menard's Retail Services<br>PO Box 17602<br>Baltimore, MD 21297-1602  | H  | Consideration: Credit card debt   |            |              |          | 59.31                 |
| ACCOUNT NO. 100017348<br>Menards<br>4850 Cog Circle<br>Crystal Lake, IL 60014  | H  | Consideration: NSF check  |            |              |          | 115.76                |
| ACCOUNT NO. 08-04356-0325-27<br>Merchants Credit Guide<br>o/b/o Retailers National Bank<br>PO Box 18053<br>Hauppauge, NY 11788-8852        | W  | Consideration: Credit card debt   |            |              |          | Notice Only           |
| ACCOUNT NO. 15-057198588<br>Merchants Credit Guide<br>o/b/o Retailers National Basnk<br>PO Box 18053<br>Hauppauge, NY 11788-8852           | H  | Consideration: Credit card debt   |            |              |          | 0.00                  |

Sheet no. 16 of 25 continuation sheets attached  
to Schedule of Creditors Holding Unsecured  
Nonpriority Claims

Subtotal > \$ 175.07

Total > \$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Vanessa Leigh Shafer & Christopher Michael Shafer,  
Debtor

Case No. \_\_\_\_\_  
(If known)

**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.)                            | CODEBTOR<br>HUSBAND, WIFE, JOINT<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM.<br>IF CLAIM IS SUBJECT TO SETOFF, | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT<br>OF<br>CLAIM |
|--|--|---|------------|--------------|----------|-----------------------|
| ACCOUNT NO. IL04075748-01<br>Mercury Insurance<br>7301 NW Expressway<br>Oklahoma City, OK 73132  | W  | Consideration: Insurance Premiums   |            |              |          | 56.00                 |
| ACCOUNT NO. 8042-2871<br>MHS Physician Services<br>PO Box 5081<br>Janesville, WI 53547-5081  | W  | Consideration: Medical services   |            |              |          | 1,132.67              |
| ACCOUNT NO. 8045-0024<br>MHS Physician Services<br>PO Box 5081<br>Janesville, WI 53547-5081  | W  | Consideration: Medical services   |            |              |          | 1,326.18              |
| ACCOUNT NO. 468642<br>Michaels<br>P:O Box 619566<br>Dallas, TX 75261-9566  | W  | Consideration: NSF check  |            |              |          | 60.60                 |
| ACCOUNT NO. 05-09960-0<br>Michling, Hofmann, Vinton, Plaza &<br>Wick<br>o/b/o Centegra HBH<br>101 N. Throop Street<br>Woodstock. IL 6009 | W  | Consideration: Medical services   |            |              |          | Notice Only           |

Sheet no. 17 of 25 continuation sheets attached  
to Schedule of Creditors Holding Unsecured  
Nonpriority Claims

Subtotal > \$ 2,575.45

Total > \$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Vanessa Leigh Shafer & Christopher Michael Shafer,  
Debtor

Case No. \_\_\_\_\_  
(If known)

**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.)           | CODEBTOR<br>HUSBAND, WIFE, JOINT<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM.<br>IF CLAIM IS SUBJECT TO SETOFF, | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT<br>OF<br>CLAIM |
|---|--|---|------------|--------------|----------|-----------------------|
| ACCOUNT NO. 254839368<br>Microsoft<br>PO Box 847124<br>Dallas, TX 75284-7124  | W  | Consideration: Subscription   |            |              |          | 43.90                 |
| ACCOUNT NO. 861-1-0002697199<br>Midwest Diagnostic Pathology<br>75 Remittance Drive, Ste 3070<br>Chicago, IL 60675-3070 | W  | Consideration: Credit card debt   |            |              |          | 12.00                 |
| ACCOUNT NO. MN1704056001917<br>Moraine ER Physicians<br>PO Box 8759<br>Philadelphia, PA 19101-8759                      | W  | Consideration: Medical services   |            |              |          | 440.00                |
| ACCOUNT NO. MN1708104000086<br>Moraine ER Physicians<br>PO Box 8759<br>Philadelphia, PA 19101-8759                      | H  | Consideration: Medical services   |            |              |          | 11.97                 |
| ACCOUNT NO. `704056001917<br>Moraine ER Physicians<br>PO Box 8759<br>Philadelphia, PA 19101-8759                        | W  | Consideration: Medical services   |            |              |          | 354.00                |

Sheet no. 18 of 25 continuation sheets attached  
to Schedule of Creditors Holding Unsecured  
Nonpriority Claims

Subtotal > \$ 861.87

Total > \$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Vanessa Leigh Shafer & Christopher Michael Shafer,  
Debtor

Case No. \_\_\_\_\_  
(If known)

## SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.)        | CODEBTOR<br>HUSBAND, WIFE, JOINT<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM.<br>IF CLAIM IS SUBJECT TO SETOFF, | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT<br>OF<br>CLAIM |
|--|--|---|------------|--------------|----------|-----------------------|
| ACCOUNT NO. 704056001`917<br>Moraine ER Physicians<br>PO Box 8759<br>Philadelphia, PA 19101-8759                     | W  | Consideration: Medical services   |            |              |          | 164.00                |
| ACCOUNT NO. 60522675-0<br>NCO Financial<br>o/b/o Advocate Good Shepherd<br>507 Prudential Road<br>Horsham, PA 19044  | W  | Consideration: Medical services   |            |              |          | Notice Only           |
| ACCOUNT NO. 5C000Q<br>NCO Financial<br>o/b/o McHenry County College<br>507 Prudential Road<br>Horsham, PA 19044      | H  | Consideration: NSF Check  |            |              |          | Notice Only           |
| ACCOUNT NO. 704056001917<br>NCO Financial<br>o/b/o Moraine ER Physicians<br>507 Prudential Road<br>Horsham, PA 19044 | W  | Consideration: Medical services   |            |              |          | Notice Only           |
| ACCOUNT NO. 704056001917<br>NCO Financial<br>o/b/o Moraine ER Physicians<br>507 Prudential Road<br>Horsham, PA 19044 | W  | Consideration: Medical services   |            |              |          | Notice Only           |

Sheet no. 19 of 25 continuation sheets attached  
to Schedule of Creditors Holding Unsecured  
Nonpriority Claims

Subtotal > \$ 164.00

Total > \$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Vanessa Leigh Shafer & Christopher Michael Shafer,  
Debtor

Case No. \_\_\_\_\_  
(If known)

**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.)          | CODEBTOR<br>HUSBAND, WIFE, JOINT<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM.<br>IF CLAIM IS SUBJECT TO SETOFF, | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT<br>OF<br>CLAIM |
|--|--|---|------------|--------------|----------|-----------------------|
| ACCOUNT NO. 08-04356032507<br>NCO Financial<br>o/b/o Pediatric Specialists<br>507 Prudential Road<br>Horsham, PA 19044 | W  | Consideration: Medical services   |            |              |          | Notice Only           |
|  |  |   |            |              |          |                       |
| ACCOUNT NO. 1975534<br>North Shore Agency<br>o/b/o Disney Movie Club<br>751 Summer Avenue<br>Westbury, NY 11590        | W  | Consideration: Movies   |            |              |          | Notice Only           |
|  |  |   |            |              |          |                       |
| ACCOUNT NO. 63231000729571B<br>Northwet Metro Urology<br>7900 N. Milwaukee Avenue #17<br>Niles, IL 60714               | W  | Consideration: Medical services   |            |              |          | 199.90                |
|  |  |   |            |              |          |                       |
| ACCOUNT NO. 154714017<br>One Click Cash<br>14545-1 Military Trail #359<br>Delray Beach, FL 33484                       | W  | Consideration: Personal loan  |            |              |          | 390.00                |
|  |  |   |            |              |          |                       |
| ACCOUNT NO. 4247-3550-5157-3619<br>Orchard Bank<br>PO Box 88000<br>Baltimore, MD 21288                                 | W  | Consideration: Credit card debt   |            |              |          | 323.55                |
|  |  |   |            |              |          |                       |

Sheet no. 20 of 25 continuation sheets attached  
to Schedule of Creditors Holding Unsecured  
Nonpriority Claims

Subtotal > \$ 913.45

Total > \$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Vanessa Leigh Shafer & Christopher Michael Shafer,  
Debtor

Case No. \_\_\_\_\_  
(If known)

**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.)  | CODEBTOR<br>HUSBAND, WIFE, JOINT<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM.<br>IF CLAIM IS SUBJECT TO SETOFF, | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT<br>OF<br>CLAIM |
|--|--|---|------------|--------------|----------|-----------------------|
| ACCOUNT NO. 6089799  | W  | Consideration: Medical services   |            |              |          | Notice Only           |
| OSI Collection<br>o/b/o Lake/McHenry Pathology<br>1375 E. Woodfield Road, Ste 110<br>Schaumburg, IL 60173-5447 |  |   |            |              |          |                       |
| ACCOUNT NO. 6089692  | W  | Consideration: Medical services   |            |              |          | Notice Only           |
| OSI Collection<br>o/b/o Lake/McHenry Pathology<br>1375 E. Woodfield Road, Ste 110<br>Schaumburg, IL 60173-5447 |  |   |            |              |          |                       |
| ACCOUNT NO. 6211883  | H  | Consideration: Medical services   |            |              |          | 34.58                 |
| OSI Collection<br>o/b/o Lake/McHenry Pathology<br>1375 E. Woodfield Road, Ste 110<br>Schaumburg, IL 60173-5447 |  |   |            |              |          |                       |
| ACCOUNT NO. 6401157  | W  | Consideration: Medical services   |            |              |          | Notice Only           |
| OSI Collection<br>o/b/o Lake/McHenry Pathology<br>1375 E. Woodfield Road, Ste 110<br>Schaumburg, IL 60173-5447 |  |   |            |              |          |                       |
| ACCOUNT NO. 4219873  | W  | Consideration: Medical services   |            |              |          | Notice Only           |
| OSI Collection<br>o/b/o Moraine ER Physicians<br>1375 E. Woodfield Road, Ste 110<br>Schaumburg, IL 60173-5447  |  |   |            |              |          |                       |

Sheet no. 21 of 25 continuation sheets attached  
to Schedule of Creditors Holding Unsecured  
Nonpriority Claims

Subtotal > \$ 34.58

Total > \$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Vanessa Leigh Shafer & Christopher Michael Shafer,  
Debtor

Case No. \_\_\_\_\_  
(If known)

**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.)                         | CODEBTOR<br>HUSBAND, WIFE, JOINT<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM.<br>IF CLAIM IS SUBJECT TO SETOFF, | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT<br>OF<br>CLAIM |
|---|--|---|------------|--------------|----------|-----------------------|
| ACCOUNT NO. 19239<br>Pediatric Specialists of the Northwest<br>5057 Shoreline Road<br>Lake Barrington, IL 60010                       | W  | Consideration: Medical services   |            |              |          | 569.90                |
| ACCOUNT NO. 320220130<br>Pellettieri & Associates<br>o/b/o Advocate Lutheran General<br>991 Oak Creek Drive<br>Lombard, IL 60148-6408 | W  | Consideration: Medical services   |            |              |          | Notice Only           |
| ACCOUNT NO. B16381<br>Penncro<br>o/b/o Bank of America<br>PO Box 538<br>Oaks, PA 19456  |  | Consideration: Overdraft Fees   |            |              |          | Notice Only           |
| ACCOUNT NO. CET938<br>PFG of Minnesota<br>o/b/o LTD<br>7825 Washington Avenue, Ste 310<br>Minneapolis, MN 55439-2409                  | W  | Consideration: merchandise  |            |              |          | Notice Only           |
| ACCOUNT NO.<br>ProActiv Solution<br>PO Box 11448<br>Des Moines, IA 11448  | W  | Consideration: Medical services   |            |              |          | 45.85                 |

Sheet no. 22 of 25 continuation sheets attached  
to Schedule of Creditors Holding Unsecured  
Nonpriority Claims

|          |    |        |
|----------|----|--------|
| Subtotal | \$ | 615.75 |
| Total    | \$ |        |

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)



B6F (Official Form 6F) (12/07) - Cont.

In re Vanessa Leigh Shafer & Christopher Michael Shafer,  
Debtor

Case No. \_\_\_\_\_  
(If known)

**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.)                  | CODEBTOR<br>HUSBAND, WIFE, JOINT<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM.<br>IF CLAIM IS SUBJECT TO SETOFF, | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT<br>OF<br>CLAIM |
|--|--|---|------------|--------------|----------|-----------------------|
| ACCOUNT NO. 601101345314155<br>Recovery One<br>o/b/o Discover<br>5100 Parkcenter Ave, Ste 120<br>Dublin. OH 43017              |  | Consideration: Credit card debt   |            |              |          | Notice Only           |
| ACCOUNT NO. 3007776218310<br>Retailers National Bank<br>3701 Mayzaa Blvde.<br>Minneapo9ilis, MN 55416                          | H  | Consideration: Credit card debt   |            |              |          | 1,430.06              |
| ACCOUNT NO. 9728<br>Salmon Goldberg<br>500 Skokie Blvd.<br>Northbrook, IL 60062  | W  | Consideration: Medical services   |            |              |          | 18.20                 |
| ACCOUNT NO. 1598766-1<br>Shafer & Associates<br>o/b/o Scholastic<br>100 South Street, Ste 100<br>Columbia, MO 65201            | W  | Consideration: Merchandise  |            |              |          | 79.45                 |
| ACCOUNT NO. 248264558<br>SKO Brenner American, Inc.<br>o/b/o ProActiv Solution<br>PO Box 230<br>Barmingtondale,. NY 11735-0230 | W  | Consideration: Medical services   |            |              |          | Notice Only           |

Sheet no. 23 of 25 continuation sheets attached  
to Schedule of Creditors Holding Unsecured  
Nonpriority Claims

Subtotal > \$ 1,527.71

Total > \$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Vanessa Leigh Shafer & Christopher Michael Shafer,  
Debtor

Case No. \_\_\_\_\_  
(If known)

**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.)                               | CODEBTOR<br>HUSBAND, WIFE, JOINT<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM.<br>IF CLAIM IS SUBJECT TO SETOFF, | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT<br>OF<br>CLAIM |
|---|--|---|------------|--------------|----------|-----------------------|
| ACCOUNT NO. 5652<br>Southern Illinois University<br>900 South Normal Avenue<br>Carbondale, IL 62901   | H  | Consideration: Tuition  |            |              |          | 4,060.62              |
| ACCOUNT NO. 515191<br>Surgical Associates of Fox Valley<br>690 E. Terra Cotta Avenue<br>Crystal Lake, IL 60014                              | H  | Consideration: Medical services   |            |              |          | 358.00                |
| ACCOUNT NO. 107-1-0000373010<br>Town Square Anesthesiologists<br>520 E. 22nd Street<br>Lombard, IL 60148                                    | W  | Consideration: Medical services   |            |              |          | 144.00                |
| ACCOUNT NO. 00140791-06<br>Trackers, Inc.<br>o/b/o First Midwest<br>PO Box 1227<br>Bettendorf, IA 52722                                     | W  | Consideration: Bank Overdraft   |            |              |          | Notice Only           |
| ACCOUNT NO. 63231000729571B<br>Transworld Systems, Inc.<br>o/b/o Northwest Metro Urology<br>25 Northwest Point Blvd.<br>Elk Grove, IL 60071 | W  | Consideration: Medical services   |            |              |          | Notice Only           |

Sheet no. 24 of 25 continuation sheets attached  
to Schedule of Creditors Holding Unsecured  
Nonpriority Claims

Subtotal > \$ 4,562.62

Total > \$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Vanessa Leigh Shafer & Christopher Michael Shafer,  
Debtor

Case No. \_\_\_\_\_  
(If known)

## SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.)     | CODEBTOR<br>HUSBAND, WIFE, JOINT<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM.<br>IF CLAIM IS SUBJECT TO SETOFF, | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT<br>OF<br>CLAIM |
|---|--|---|------------|--------------|----------|-----------------------|
| ACCOUNT NO. 3053096326082<br>TRS Recovery<br>o/b/o Bank of America<br>5251 Westheimer<br>Houston, TX 77056        |  | Consideration: Overdraft Fees   |            |              |          | Notice Only           |
| ACCOUNT NO. 100017349<br>United Recovery Systems<br>o/b/o Menards<br>5800 North Course Drive<br>Houston, TX 77072 | H  | Consideration: Medical services   |            |              |          | Notice Only           |
| ACCOUNT NO. 100017348<br>United Recovery Systems<br>o/b/o Menards<br>5800 North Course Drive<br>Houston, TX 77072 | H  | Consideration: NSF check  |            |              |          | Notice Only           |
| ACCOUNT NO. 105570<br>Wickstrom Ford<br>600 West Northwest Hwy<br>Barrington, IL 60010                            | W  | Consideration: Auto Work  |            |              |          | 441.22                |
| ACCOUNT NO. 106-1-0000394368<br>Woodstock Imaging<br>520 E 22nd Street<br>Lombard, IL 60148                       | W  | Consideration: Medical services   |            |              |          | 158.00                |

Sheet no. 25 of 25 continuation sheets attached  
to Schedule of Creditors Holding Unsecured  
Nonpriority Claims

Subtotal > \$ 599.22

Total > \$ 35,611.60

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)

In re

Vanessa Leigh Shafer & Christopher Michael Shafer

Debtor

Case No.

(if known)

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

☒

 Check this box if debtor has no executory contracts or unexpired leases.

| NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT. | DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT. |
|--|--|
|  |  |
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In re Vanessa Leigh Shafer & Christopher Michael Shafer

Debtor

Case No. \_\_\_\_\_

(if known)

**SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. Bankr. P. 1007(m).

☐ Check this box if debtor has no codebtors.

| NAME AND ADDRESS OF CODEBTOR                             | NAME AND ADDRESS OF CREDITOR                                      |
|--|---|
| Frank Basler<br>3616 W. Drake Court<br>McHenry, IL 60050 | GM Automobile Financing<br>PO Box 9001951<br>Louisville, KY 40290 |

B6I (Official Form 6I) (12/07)

In re Vanessa Leigh Shafer &amp; Christopher Michael Shafer

Case (if known)

Debtor

**SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)**

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

|                                  |                                 |                      |
|----------------------------------|---------------------------------|----------------------|
| Debtor's Marital Status: Married | DEPENDENTS OF DEBTOR AND SPOUSE |                      |
|                                  | RELATIONSHIP(S): son, son       | AGE(S): 6, 4         |
| <b>Employment:</b>               | DEBTOR                          | SPOUSE               |
| Occupation                       | Administrative Assistant        | Firefighter/EMT      |
| Name of Employer                 | Centegra Health                 | MTFPD                |
| How long employed                | 1/2004                          | 2 years              |
| Address of Employer              | 4201 Medical Center Drive       | 3610 West Elm Street |
|                                  | McHenry, IL 60050               | McHenry, IL 60050    |

INCOME: (Estimate of average or projected monthly income at time case filed)

1. Monthly gross wages, salary, and commissions

(Prorate if not paid monthly.)

| DEBTOR      | SPOUSE      |
|-------------|-------------|
| \$ 3,095.56 | \$ 3,490.61 |

2. Estimated monthly overtime

|         |         |
|---------|---------|
| \$ 0.00 | \$ 0.00 |
|---------|---------|

3. SUBTOTAL

|             |             |
|-------------|-------------|
| \$ 3,095.56 | \$ 3,490.61 |
|-------------|-------------|

4. LESS PAYROLL DEDUCTIONS

a. Payroll taxes and social security

b. Insurance

c. Union Dues

d. Other (Specify: (S)Food 11.26 C01 Contribution 5.60)

|           |           |
|-----------|-----------|
| \$ 463.51 | \$ 385.99 |
| \$ 350.30 | \$ 0.00   |
| \$ 0.00   | \$ 10.50  |
| \$ 0.00   | \$ 16.86  |

5. SUBTOTAL OF PAYROLL DEDUCTIONS

|           |           |
|-----------|-----------|
| \$ 813.81 | \$ 413.35 |
|-----------|-----------|

6.. TOTAL NET MONTHLY TAKE HOME PAY

|             |             |
|-------------|-------------|
| \$ 2,281.75 | \$ 3,077.26 |
|-------------|-------------|

7. Regular income from operation of business or profession or farm

(Attach detailed statement)

|         |         |
|---------|---------|
| \$ 0.00 | \$ 0.00 |
|---------|---------|

8. Income from real property

|         |         |
|---------|---------|
| \$ 0.00 | \$ 0.00 |
|---------|---------|

9. Interest and dividends

|         |         |
|---------|---------|
| \$ 0.00 | \$ 0.00 |
|---------|---------|

10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above.

|         |         |
|---------|---------|
| \$ 0.00 | \$ 0.00 |
|---------|---------|

11. Social security or other government assistance

(Specify)

|         |         |
|---------|---------|
| \$ 0.00 | \$ 0.00 |
|---------|---------|

12. Pension or retirement income

|         |         |
|---------|---------|
| \$ 0.00 | \$ 0.00 |
|---------|---------|

13. Other monthly income

(Specify)

|         |         |
|---------|---------|
| \$ 0.00 | \$ 0.00 |
|---------|---------|

14. SUBTOTAL OF LINES 7 THROUGH 13

|         |         |
|---------|---------|
| \$ 0.00 | \$ 0.00 |
|---------|---------|

15. AVERAGE MONTHLY INCOME (Add amounts shown on Lines 6 and 14)

|             |             |
|-------------|-------------|
| \$ 2,281.75 | \$ 3,077.26 |
|-------------|-------------|

16. COMBINED AVERAGE MONTHLY INCOME (Combine column totals from line 15)

|             |  |
|-------------|--|
| \$ 5,359.01 |  |
|-------------|--|

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

None

In re Vanessa Leigh Shafer & Christopher Michael Shafer

Case No. \_\_\_\_\_  
(if known)

Debtor

## SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made biweekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form 22A or 22C.

☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

- |   |    |          |
|---|----|----------|
| 1. Rent or home mortgage payment (include lot rented for mobile home)   | \$ | 1,410.69 |
| a. Are real estate taxes included? Yes _____ No <u>✓</u>  |    |          |
| b. Is property insurance included? Yes _____ No <u>✓</u>  |    |          |
| 2. Utilities: a. Electricity and heating fuel   | \$ | 275.00   |
| b. Water and sewer  | \$ | 62.00    |
| c. Telephone  | \$ | 0.00     |
| d. Other <u>Garbage 25 Cells 66 Internet 39.99 Cable 78.01</u>  | \$ | 209.00   |
| 3. Home maintenance (repairs and upkeep)  | \$ | 100.00   |
| 4. Food   | \$ | 500.00   |
| 5. Clothing   | \$ | 100.00   |
| 6. Laundry and dry cleaning   | \$ | 50.00    |
| 7. Medical and dental expenses  | \$ | 100.00   |
| 8. Transportation (not including car payments)  | \$ | 400.00   |
| 9. Recreation, clubs and entertainment, newspapers, magazines, etc.   | \$ | 100.00   |
| 10. Charitable contributions  | \$ | 0.00     |
| 11. Insurance (not deducted from wages or included in home mortgage payments)   |    |          |
| a. Homeowner's or renter's  | \$ | 10.43    |
| b. Life   | \$ | 0.00     |
| c. Health   | \$ | 0.00     |
| d. Auto   | \$ | 239.00   |
| e. Other _____  | \$ | 0.00     |
| 12. Taxes (not deducted from wages or included in home mortgage payments)   |    |          |
| (Specify) <u>Property</u>   | \$ | 387.00   |
| 13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan)  |    |          |
| a. Auto   | \$ | 0.00     |
| b. Other <u>Kresswood Trails Homeowners Assn.</u>   | \$ | 147.00   |
| c. Other _____  | \$ | 0.00     |
| 14. Alimony, maintenance, and support paid to others  | \$ | 0.00     |
| 15. Payments for support of additional dependents not living at your home   | \$ | 0.00     |
| 16. Regular expenses from operation of business, profession, or farm (attach detailed statement)  | \$ | 0.00     |
| 17. Other <u>School 40 Child Care 360</u>   | \$ | 400.00   |
| 18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data) | \$ | 4,490.12 |
| 19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document:                                |    |          |
| <u>None</u>   |    |          |

## 20. STATEMENT OF MONTHLY NET INCOME

- |   |    |          |
|---|----|----------|
| a. Average monthly income from Line 15 of Schedule I (Includes spouse income of \$3,077.26. See Schedule I) | \$ | 5,359.01 |
| b. Average monthly expenses from Line 18 above  | \$ | 4,490.12 |
| c. Monthly net income (a. minus b.) (Net includes Debtor/Spouse combined Amounts)                           | \$ | 868.89   |

**B6 Summary (Official Form 6 - Summary) (12/07)**

# United States Bankruptcy Court

Northern District of Illinois

Vanessa Leigh Shafer & Christopher Michael Shafer

In re \_\_\_\_\_  
Debtor

Case No. \_\_\_\_\_

Chapter 13

## SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

### AMOUNTS SCHEDULED

| NAME OF SCHEDULE  | ATTACHED<br>(YES/NO) | NO. OF SHEETS | ASSETS        | LIABILITIES   | OTHER       |
|---|----------------------|---------------|---------------|---------------|-------------|
| A - Real Property   | YES                  | 1             | \$ 210,000.00 |               |             |
| B - Personal Property   | YES                  | 3             | \$ 35,925.00  |               |             |
| C - Property Claimed<br>as exempt   | YES                  | 1             |               |               |             |
| D - Creditors Holding<br>Secured Claims   | YES                  | 2             |               | \$ 227,330.39 |             |
| E - Creditors Holding Unsecured<br>Priority Claims<br>(Total of Claims on Schedule E) | YES                  | 2             |               | \$ 0.00       |             |
| F - Creditors Holding Unsecured<br>Nonpriority Claims                                 | YES                  | 26            |               | \$ 35,611.60  |             |
| G - Executory Contracts and<br>Unexpired Leases                                       | YES                  | 1             |               |               |             |
| H - Codebtors   | YES                  | 1             |               |               |             |
| I - Current Income of<br>Individual Debtor(s)   | YES                  | 1             |               |               | \$ 5,359.01 |
| J - Current Expenditures of Individual<br>Debtors(s)                                  | YES                  | 1             |               |               | \$ 4,490.12 |
| <b>TOTAL</b>  |                      | 39            | \$ 245,925.00 | \$ 262,941.99 |             |



# United States Bankruptcy Court

## Northern District of Illinois

In re Vanessa Leigh Shafer & Christopher Michael Shafer

Debtor

Case No. \_\_\_\_\_

Chapter 13

### STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

**This information is for statistical purposes only under 28 U.S.C. § 159.**

**Summarize the following types of liabilities, as reported in the Schedules, and total them.**

| Type of Liability   | Amount  |
|---|---------|
| Domestic Support Obligations (from Schedule E)  | \$ 0.00 |
| Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)  | \$ 0.00 |
| Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed) | \$ 0.00 |
| Student Loan Obligations (from Schedule F)  | \$ 0.00 |
| Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E                   | \$ 0.00 |
| Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)                           | \$ 0.00 |
| TOTAL   | \$ 0.00 |

#### State the Following:

|   |             |
|---|-------------|
| Average Income (from Schedule I, Line 16)   | \$ 5,359.01 |
| Average Expenses (from Schedule J, Line 18)   | \$ 4,490.12 |
| Current Monthly Income (from Form 22A Line 12; <b>OR</b> , Form 22B Line 11; <b>OR</b> , Form 22C Line 20 ) | \$ 7,000.67 |

#### State the Following:

|  |         |              |
|--|---------|--------------|
| 1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column               |         | \$ 6,609.72  |
| 2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.            | \$ 0.00 |              |
| 3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column |         | \$ 0.00      |
| 4. Total from Schedule F   |         | \$ 35,611.60 |
| 5. Total of non-priority unsecured debt (sum of 1, 3, and 4)               |         | \$ 42,221.32 |

Vanessa Leigh Shafer & Christopher Michael Shafer

In re \_\_\_\_\_ Case No. \_\_\_\_\_  
Debtor (If known)

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 41 sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date 28 OCTOBER 2008 Signature: /s/ Vanessa Leigh Shafer  
Debtor:

Date 28 OCTOBER 2008 Signature: /s/ Christopher Michael Shafer  
(Joint Debtor, if any)

[If joint case, both spouses must sign.]

DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h) and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110 setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section.

Printed or Typed Name and Title, if any, Social Security No.  
of Bankruptcy Petition Preparer (Required by 11 U.S.C. § 110.)

If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs this document.

\_\_\_\_\_  
\_\_\_\_\_  
Address

X \_\_\_\_\_ Date  
Signature of Bankruptcy Petition Preparer

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF A CORPORATION OR PARTNERSHIP

I, the \_\_\_\_\_ [the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership] of the \_\_\_\_\_ [corporation or partnership] named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of \_\_\_\_\_ sheets (total shown on summary page plus 1), and that they are true and correct to the best of my knowledge, information, and belief.

Date \_\_\_\_\_ Signature: \_\_\_\_\_  
[Print or type name of individual signing on behalf of debtor.]

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

In Re Vanessa Leigh Shafer & Christopher Michael Shafer

Case No. \_\_\_\_\_  
(if known)

## STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

### DEFINITIONS

**"In business."** A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

**"Insider."** The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

### 1. Income from employment or operation of business

None  
☐

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

|           | AMOUNT   | SOURCE     |                        |
|-----------|----------|------------|------------------------|
| 2008(db)  | 28825.19 | Employment | FY: 01/2008 to 10/2008 |
| 2007(db)  | 28969.18 | Employment |                        |
| 2006(db)  | 30499.77 | Employmnt  |                        |
| 2008(jdb) | 27712.81 | Employment | FY: 01/2008 to 10/2008 |
| 2007(jdb) | 19235.03 | Employment |                        |
| 2006(jdb) | 2619.00  | Employment |                        |

**2. Income other than from employment or operation of business**

None

☐

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT

SOURCE

(db)

(db)

2006(jdb) 7325.90 Construction

(jdb)

**3. Payments to creditors**

None

☒

*Complete a. or b., as appropriate, and c.*

*a. Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATES OF  
PAYMENTS

AMOUNT  
PAID

AMOUNT STILL  
OWING

None

☒

*b. Debtor whose debts are not primarily consumer debts:* List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,475. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR  
AND RELATIONSHIP TO DEBTOR

DATES OF  
PAYMENTS

AMOUNT  
PAID

AMOUNT STILL  
OWING

None



*c. All debtors:* List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR  
AND RELATIONSHIP TO DEBTOR

DATES OF  
PAYMENTS

AMOUNT PAID

AMOUNT STILL  
OWING

**4. Suits and administrative proceedings, executions, garnishments and attachments**

None



*a.* List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT  
AND CASE NUMBER

NATURE OF PROCEEDING

COURT OR  
AGENCY AND LOCATION

STATUS OR  
DISPOSITION

None



*b.* Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF  
PERSON FOR WHOSE BENEFIT  
PROPERTY WAS SEIZED

DATE OF  
SEIZURE

DESCRIPTION AND  
VALUE OF PROPERTY

**5. Repossessions, foreclosures and returns**

None



List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND  
ADDRESS OF  
CREDITOR OR SELLER

DATE OF REPOSESSION,  
FORECLOSURE SALE,  
TRANSFER OR RETURN

DESCRIPTION AND  
VALUE OF PROPERTY

**6. Assignments and Receiverships**

None ☒ a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND<br>ADDRESS<br>OF ASSIGNEE | DATE OF ASSIGNMENT | TERMS OF<br>ASSIGNMENT<br>OR SETTLEMENT |
|------------------------------------|--------------------|---|
|------------------------------------|--------------------|---|

None ☒ b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND<br>ADDRESS<br>OF CUSTODIAN | NAME AND LOCATION<br>OF COURT CASE TITLE<br>& NUMBER | DATE OF<br>ORDER | DESCRIPTION AND<br>VALUE OF PROPERTY |
|-------------------------------------|--|------------------|--------------------------------------|
|-------------------------------------|--|------------------|--------------------------------------|

**7. Gifts**

None ☒ List all gifts or charitable contributions made within one year immediately preceding the commencement of this case, except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND<br>ADDRESS OF<br>PERSON OR ORGANIZATION | RELATIONSHIP<br>TO DEBTOR, IF ANY | DATE OF<br>GIFT | DESCRIPTION AND<br>VALUE OF GIFT |
|--|-----------------------------------|-----------------|----------------------------------|
|--|-----------------------------------|-----------------|----------------------------------|

**8. Losses**

None ☒ List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| DESCRIPTION<br>AND VALUE<br>OF PROPERTY | DESCRIPTION OF CIRCUMSTANCES, AND, IF LOSS<br>WAS COVERED IN WHOLE OR IN PART BY<br>INSURANCE, GIVE PARTICULARS | DATE OF<br>LOSS |
|---|---|-----------------|
|---|---|-----------------|

**9. Payments related to debt counseling or bankruptcy**

None ☐ List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within one year immediately preceding the commencement of this case.

| NAME AND ADDRESS OF PAYEE                                    | DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR | AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY |
|--|---|--|
| Scott A. Bentley<br>661 Ridgeview Drive<br>McHenry, IL 60050 | 10-28-08  | \$1,000.00   |
| CCCS of McHenry ounty  | 10-21-08  | \$50.00  |

**10. Other transfers**

None ☒ a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR | DATE | DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED |
|--|------|--|
|--|------|--|

b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

None ☒

| NAME OF TRUST OR OTHER DEVICE | DATE(S) OF TRANSFER(S) | AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY |
|-------------------------------|------------------------|---|
|-------------------------------|------------------------|---|

**11. Closed financial accounts**

None



List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF INSTITUTION | TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE | AMOUNT AND DATE OF SALE OR CLOSING |
|---------------------------------|--|------------------------------------|
|---------------------------------|--|------------------------------------|

**12. Safe deposit boxes**

None



List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY | NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY | DESCRIPTION OF CONTENTS | DATE OF TRANSFER OR SURRENDER, IF ANY |
|--|---|-------------------------|---------------------------------------|
|--|---|-------------------------|---------------------------------------|

**13. Setoffs**

None



List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF CREDITOR | DATE OF SETOFF | AMOUNT OF SETOFF |
|------------------------------|----------------|------------------|
|------------------------------|----------------|------------------|

**14. Property held for another person**

None



List all property owned by another person that the debtor holds or controls.

| NAME AND ADDRESS OF OWNER | DESCRIPTION AND VALUE OF PROPERTY | LOCATION OF PROPERTY |
|---------------------------|-----------------------------------|----------------------|
|---------------------------|-----------------------------------|----------------------|



**15. Prior address of debtor**

None



If the debtor has moved within the three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS

NAME USED

DATES OF OCCUPANCY

**16. Spouses and Former Spouses**

None



If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

**17. Environmental Sites**

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None



a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME  
AND ADDRESS

NAME AND ADDRESS  
OF GOVERNMENTAL UNIT

DATE OF  
NOTICE

ENVIRONMENTAL  
LAW

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

None



| SITE NAME<br>AND ADDRESS | NAME AND ADDRESS<br>OF GOVERNMENTAL UNIT | DATE OF<br>NOTICE | ENVIRONMENTAL<br>LAW |
|--------------------------|--|-------------------|----------------------|
|--------------------------|--|-------------------|----------------------|

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

None



| NAME AND ADDRESS<br>OF GOVERNMENTAL UNIT | DOCKET NUMBER | STATUS OR DISPOSITION |
|--|---------------|-----------------------|
|--|---------------|-----------------------|

**18. Nature, location and name of business**

None



a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partnership, sole proprietorship, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within the six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within the six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within the six years immediately preceding the commencement of this case.

| NAME | LAST FOUR DIGITS OF<br>SOCIAL-SECURITY OR<br>OTHER INDIVIDUAL<br>TAXPAYER-I.D. NO.<br>(ITIN)/ COMPLETE EIN | ADDRESS | NATURE OF BUSINESS | BEGINNING AND<br>ENDING DATES |
|------|--|---------|--------------------|-------------------------------|
|------|--|---------|--------------------|-------------------------------|

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

None



| NAME | ADDRESS |
|------|---------|
|------|---------|

**[Questions 19 - 25 are not applicable to this case]**

\* \* \* \* \*

*[If completed by an individual or individual and spouse]*

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

|      |                 |                        |  |
|------|-----------------|------------------------|--|
| Date | 28 OCTOBER 2008 | Signature<br>of Debtor | /s/ Vanessa Leigh Shafer<br>VANESSA LEIGH SHAFER |
|------|-----------------|------------------------|--|

|      |                 |                              |  |
|------|-----------------|------------------------------|--|
| Date | 28 OCTOBER 2008 | Signature<br>of Joint Debtor | /s/ Christopher Michael Shafer<br>CHRISTOPHER MICHAEL SHAFER |
|------|-----------------|------------------------------|--|

0 continuation sheets attached

***Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §152 and 3571***

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**DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)**

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and required under 11U.S.C. §§ 110(b), 110(h), and 342(b); (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110 setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section.

\_\_\_\_\_  
Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer

\_\_\_\_\_  
Social Security No. (Required by 11 U.S.C. § 110(c).)

*If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs this document.*

\_\_\_\_\_  
Address

X  
Signature of Bankruptcy Petition Preparer

\_\_\_\_\_  
Date

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

***A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 18 U.S.C. §156.***

UNITED STATES BANKRUPTCY COURT  
Northern District of Illinois

**NOTICE TO INDIVIDUAL CONSUMER DEBTOR UNDER § 342(b)  
OF THE BANKRUPTCY CODE**

In accordance with § 342(b) of the Bankruptcy Code, this notice: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case. You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

**1. Services Available from Credit Counseling Agencies**

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses.

**2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors**

**Chapter 7: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total fee \$299)**

1. Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

2. Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

3. The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

4. Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

**Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)**

1. Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

2. Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

3. After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

**Chapter 11: Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)**

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

**Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)**

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

**3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials**

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

**Certificate of [Non-Attorney] Bankruptcy Petition Preparer**

I, the [non-attorney] bankruptcy petition preparer signing the debtor's petition, hereby certify that I delivered to the debtor this notice required by § 342(b) of the Bankruptcy Code.

Printed Name and title, if any, of Bankruptcy Petition Preparer  
Address:

X  
Signature of Bankruptcy Petition Preparer or officer,  
principal, responsible person, or partner whose Social  
Security number is provided above.

Social Security number (If the bankruptcy petition  
preparer is not an individual, state the Social Security  
number of the officer, principal, responsible person, or partner of  
the bankruptcy petition preparer.) (Required  
by 11 U.S.C. § 110.)

**Certificate of the Debtor**

I (We), the debtor(s), affirm that I (we) have received and read this notice.

Vanessa Leigh Shafer & Christopher Michael Shafer  
Printed Name(s) of Debtor(s)

Case No. (if known) \_\_\_\_\_

X/s/ Vanessa Leigh Shafer 28 OCTOBER 2008  
Signature of Debtor Date

X/s/ Christopher Michael Shafe 28 OCTOBER 2008  
Signature of Joint Debtor (if any) Date

A&R Concepts  
o/b/o McHenry Radiology  
33 W. Higgins Road, Ste 715  
S Barrington IL 60010

A/R Concepts, Inc.  
o/b/o Anesthesia Associates  
33 W. Higgins Road, Ste 715  
S. Barrington, IL 60010

A/R Concepts, Inc.  
o/b/o McHenry Radiology  
33 W. Higgins Road, Ste 715  
S. Barrington, IL 60010

A/R Concepts, Inc.  
o/b/o McHenry Radiology  
33 W. Higgins Road, Ste 715  
S. Barrington, IL 60010

ACC International  
o/b/o Goldberg & Chudwin  
919 Estes Court  
Schaumburg, IL 60193

ACC International  
o/b/o LaSalle Bank  
919 Estes Court  
Schaumburg, IL 60193

ACC International  
o/b/o LaSalle Bank  
919 Estes Court  
Schaumburg, IL 60193

Accent  
o/b/o Guardian Lift Insurance  
7171 Mercy Road  
Omaha, NE 68106-5004

Activity Collection  
o/b/o Fritz Family Dental  
664 Milwaukee Avenue  
Prospect Heights, IL 60070

Advocate Good Shepherd Hospital  
PO Box 70014  
Chicago, IL 60673-0014

Advocate Good Shepherd Hospital  
PO Box 70014  
Chicago, IL 60673-0014

Advocate Lutheran General  
1775 Dempster Street  
Park Ridge, IL 60068

AIG  
PO Box 182  
Alpharetta, GA 30023

Alliant Law Group  
o/b/o AT&T  
2860 Zanker Road, Ste 105  
San Jose, CA 95134

American Collection System  
o/b/o H&R Block  
PO Box 29117  
Columbus, OH 43229-0117

American General Finance  
PO Box 790368  
St. Louis, MO 63179-0368

Americash Loans  
4213 W. Elm Street  
McHenry, IL 60050

Anesthesia Associates of Crystal Valley  
4309 Medical Center Drive, Ste A201  
McHenry, IL 60050

Associated Collectors  
o/b/o Axis Publishing  
PO Box 1039  
Janesville, WI 53547

AT&T  
PO Box 68055  
Anaheim Hills, CA 92817-8055

Axis Publishing  
6856 W. Gate Road  
Roscoe, IL 61073

Bank of America  
1904 Richmond Road  
McHenry, IL 60050

Bank of America  
2400 Richmond Road  
McHenry, IL 60050

Barrington Anesthesiology  
8135 N. Milwaukee Avenue  
Niles. IL 60714

Barrington OB/GYN Associates  
27790 W. Hwy 22 #32  
Barrington. IL 60010

Barrington OB/GYN Associates  
27790 W. Hwy 22 #32  
Barrington. IL 60010

Bernett & DeLoney  
o/b/o Home Depot  
1265 E. Fort Union Blvd  
Mildvale, VT 84047

Bernett & DeLoney  
o/b/o Home Depot  
1265 E. Fort Union Blvd  
Mildvale, VT 84047

Cardinal Fitness  
2210 W. Route 31  
McHenry, IL 60050



Centegra HBH  
970 S. McHenry Avenue  
Crystal Lake, IL 60014

Centegra HBH  
970 S. McHenry Avenue  
Crystal Lake, IL 60014

Centegra HBH  
970 S. McHenry Avenue  
Crystal Lake, IL 60014

Centegra NIMC  
PO Box 17  
Arrowsmith, IL 61722-0017

Certified Services  
o/b/o Condell Medical Center  
PO Box 177  
Waukegan, IL 60079-0177

Certified Services  
o/b/o Fox Valley Internal Medicine  
PO Box 177  
Waukegan, IL 60079-0177

Chase Paymentech Solutions  
5251 Westheimer 6th Floor  
Houston, TX 77056

Condell Medical Center  
755 S. Milwaukee Avenue, Ste 127  
Libertyville, IL 60048

Credit Management Svcs  
o/b/o Barrington OB/GYN  
9525 Sweet Valley Drive  
Valley View, OH 44125

D&B Receivables Management  
o/b/o Microsoft  
PO Box 12850  
Tucson, AZ 85732-2850

DirectV  
PO Box 9001069  
Louisville, KY 40290-1069

Discover  
PO Box 30395  
Salt Lake City, UT 84130

Disney Movie Club  
PO Box 758  
Neenah, WI 54957

Dr. Brian Wu  
6317 Northwest Highway  
Crystal Lake, IL 60014

Dr. Gary Oberg  
31 N. Virginia Street  
Crystal Lake, IL 60014

FFCC -Columbus, Inc.  
o/b/o Dr. Gary Oberg  
1550 Old Henderson Rd. Ste 100  
Columbus, . OH 43220-3626

Financial Control Solutions  
o/b/o Centegra HBH  
PO Box 668  
Germantown, WI 53022-0668

First Midwest Joliet  
50 W. Jefferson Street  
Joliet, IL 60432

Fox Valley Internal Medicine  
650 Dakota Street  
Crystal Lake, IL 60014

Frank Basler  
3616 W. Drake Court  
McHenry, IL 60050

Frank M. Bonifacic, Atty at Law  
o/b/o Marengo Disposal  
111 W. Washington St, Ste 1850  
Chicago, IL 60602

GM Automobile Financing  
PO Box 9001951  
Louisville, KY 40290

Goldberg & Chudwin, MD  
5911 Northwest Hwy  
Crystal Lake, IL 60014

H & R Block  
5102 W. Elm Street  
McHenry, IL 60050

H&R Accounts  
o/b/o Centegra Illinois Medical Center  
7017 John Deere Parkway  
Moline, IL 61265

Harris & Harris  
o/b/o Sherman Hospital  
600 W. Jackson Blvd.  
Chicago, IL 60661-5636

Harvard Collection  
o/b/o Barrington Anesthesia  
4839 N. Elston Avenue  
Chicago, IL 60630

Hodges University  
2655 Northbrooke Drice  
Naples. FL 34119

Home Depot  
493 N. Milwaukee Avenue  
Vernon Hills, IL 60061

Home Depot  
655 Lake Cook Road  
Deerfield. IL 60015

Illinois Department of Revenue  
100 W. Randolph Street, Ste 7-339  
Chicago, IL 60601

Johnson & Associates  
o/b/o Marengo & Disposal  
PO Box 2747  
Bloomington, IL 61702

KCA Financial Service  
o/b/o Town Square Anesthesiologists  
628 North Street  
Geneva, IL 60134

Kevin Bruning & Associates  
o/b/o Kresswood Trails Homeowners Assn.  
333 Commerce Drive  
Crystal Lake, IL 60014

Key Financial Services  
o/b/o MHS Physicians  
5315 Wall Street, Suite 170  
Madison, WI 53718

Lake/McHenry Pathology Assoc.  
520 E. 22nd Street  
Lombard, IL 60148

Lake/McHenry Pathology Assoc.  
520 E. 22nd Street  
Lombard, IL 60148

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520 E. 22nd Street  
Lombard, IL 60148

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Lombard, IL 60148

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Lombard, IL 60148

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520 E. 22nd Street  
Lombard, IL 60148

Lake/McHenry Pathology Assoc.  
520 E. 22nd Street  
Lombard, IL 60148

LaSalle Bank  
1904 N. Richmond Road  
McHenry, IL 60050

LaSalle Bank  
1904 N. Richmond Road  
McHenry, IL 60050

Lifetouch  
957 Springhill Avenue  
Mobile, AL 36604

LTD Commodities  
2800 lakeside Drive  
Bannockburn,. IL 60015

Marengo Disposal  
1050 Greenlee Street  
Marengo, IL 60152

Marengo Disposal  
1050 Greenlee Street  
Marengo, IL 60152

McHenry County College  
8900 Route 14  
Crystal Lake, IL 60014

McHenry County Treasurer  
667 Ware Road, Room 100  
Woodstock, IL 60098

McHenry Radiologists  
PO Box 220  
McHenry, IL 60050

McHenry Radiologists  
PO Box 220  
McHenry, IL 60050

McHenry Radiologists  
PO Box 220  
McHenry, IL 60050

McHenry Radiologists  
PO Box 220  
McHenry, IL 60050

Medical Recovery Specialists  
o/b/o Advocate Good Shepherd  
2200 E. Devon Ave, Ste 288  
Des Plaines, IL 60018

Menard's Retail Services  
PO Box 17602  
Baltimore, MD 21297-1602

Menards  
4850 Cog Circle  
Crystal Lake, IL 60014

Merchants Credit Guide  
o/b/o Retailers National Bank  
PO Box 18053  
Hauppauge, NY 11788-8852

Merchants Credit Guide  
o/b/o Retailers National Bank  
PO Box 18053  
Hauppauge, NY 11788-8852

Mercury Insurance  
7301 NW Expressway  
Oklahoma City, OK 73132

MHS Physician Services  
PO Box 5081  
Janesville, WI 53547-5081

MHS Physician Services  
PO Box 5081  
Janesville, WI 53547-5081

Michaels  
P:O Box 619566  
Dallas, TX 75261-9566

Michling, Hofmann, Vinton, Plaza & Wick  
o/b/o Centegra HBH  
101 N. Throop Street  
Woodstock. IL 6009

Microsoft  
PO Box 847124  
Dallas, TX 75284-7124

Midwest Diagnostic Pathology  
75 Remittance Drive, Ste 3070  
Chicago, IL 60675-3070

Moraine ER Physicians  
PO Box 8759  
Philadelphia, PA 19101-8759

Moraine ER Physicians  
PO Box 8759  
Philadelphia, PA 19101-8759

Moraine ER Physicians  
PO Box 8759  
Philadelphia, PA 19101-8759

Moraine ER Physicians  
PO Box 8759  
Philadelphia, PA 19101-8759

NCO Financial  
o/b/o Advocate Good Shepherd  
507 Prudential Road  
Horsham, PA 19044

NCO Financial  
o/b/o McHenry County College  
507 Prudential Road  
Horsham, PA 19044

NCO Financial  
o/b/o Moraine ER Physicians  
507 Prudential Road  
Horsham, PA 19044

NCO Financial  
o/b/o Moraine ER Physicians  
507 Prudential Road  
Horsham, PA 19044

NCO Financial  
o/b/o Pediatric Specialists  
507 Prudential Road  
Horsham, PA 19044

North Shore Agency  
o/b/o Disney Movie Club  
751 Summer Avenue  
Westbury, NY 11590

Northwet Metro Urology  
7900 N. Milwaukee Avenue #17  
Niles, IL 60714

One Click Cash  
14545-1 Military Trail #359  
Delray Beach, FL 33484

Orchard Bank  
PO Box 88000  
Baltimore, MD 21288

OSI Collection  
o/b/o Lake/McHenry Pathology  
1375 E. Woodfield Road, Ste 110  
Schaumburg, IL 60173-5447



OSI Collection  
o/b/o Lake/McHenry Pathology  
1375 E. Woodfield Road, Ste 110  
Schaumburg, IL 60173-5447

OSI Collection  
o/b/o Lake/McHenry Pathology  
1375 E. Woodfield Road, Ste 110  
Schaumburg, IL 60173-5447

OSI Collection  
o/b/o Lake/McHenry Pathology  
1375 E. Woodfield Road, Ste 110  
Schaumburg, IL 60173-5447

OSI Collection  
o/b/o Moraine ER Physicians  
1375 E. Woodfield Road, Ste 110  
Schaumburg, IL 60173-5447

Pediatric Specialists of the Northwest  
5057 Shoreline Road  
Lake Barrington. IL 60010

Pellettieri & Associates  
o/b/o Advocate Lutheran General  
991 Oak Creek Drive  
Lombard, IL 60148-6408

Penncro  
o/b/o Bank of America  
PO Box 538  
Oaks, PA 19456

PFG of Minnesota  
o/b/o LTD  
7825 Washington Avenue, Ste 310  
Minneapolis, MN 55439-2409

ProActiv Solution  
PO Box 11448  
Des Moines. IA 11448

Recovery One  
o/b/o Discover  
5100 Parkcenter Ave, Ste 120  
Dublin. OH 43017

Retailers National Bank  
3701 Mayzaa Blvde.  
Minneapo9ilis, MN 55416

Salmon Goldberg  
500 Skokie Blvd.  
Northbrook, IL 60062

Shafer & Associates  
o/b/o Scholastic  
100 South Street, Ste 100  
Columbia, MO 65201

SKO Brenner American, Inc.  
o/b/o ProActiv Solution  
PO Box 230  
Barmingtondale, . NY 11735-0230

Southern Illinois University  
900 South Normal Avenue  
Carbondale, IL 62901

Surgical Associates of Fox Valley  
690 E. Terra Cotta Avenue  
Crystal Lake, IL 60014

Town Square Anesthesiologists  
520 E. 22nd Street  
Lombard, IL 60148

Trackers, Inc.  
o/b/o First Midwest  
PO Box 1227  
Bettendorf, IA 52722

Transworld Systems, Inc.  
o/b/o Northwest Metro Urology  
25 Northwest Point Blvd.  
Elk Grove, IL 60071

TRS Recovery  
o/b/o Bank of America  
5251 Westheimer  
Houston. TX 77056

United Recovery Systems  
o/b/o Menards  
5800 North Course Drive  
Houston, TX 77072

United Recovery Systems  
o/b/o Menards  
5800 North Course Drive  
Houston, TX 77072

Washington Mutual Home Loans  
1301 Second Avenue  
Seattle, WA 98101

Wickstrom Ford  
600 West Northwest Hwy  
Barrington. IL 60010

Woodstock Imaging  
520 E 22nd Street  
Lombard, IL 60148

B203  
12/94

# United States Bankruptcy Court

Northern District of Illinois

In re Vanessa Leigh Shafer & Christopher Michael Shafer

Case No. \_\_\_\_\_

Chapter 13

Debtor(s)

## DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above-named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept ..... \$ 3,500.00

Prior to the filing of this statement I have received ..... \$ 1,000.00

Balance Due ..... \$ 2,500.00

2. The source of compensation paid to me was:

☒ Debtor ☐ Other (specify)

3. The source of compensation to be paid to me is:

☒ Debtor ☐ Other (specify)

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

### CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in the bankruptcy proceeding.

28 OCTOBER 2008

*Date*

/s/ Scott A. Bentley

*Signature of Attorney*

*Name of law firm*